

Disabilities and the Disabled in the Roman World

A Social and Cultural History

Christian Laes



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DISABILITIES AND THE DISABLED IN THE ROMAN WORLD

Almost 15 per cent of the world's population today experiences some form of mental or physical disability, and society tries to accommodate their needs. But what was the situation in the Roman world? Was there a concept of disability? How were the disabled treated? How did they manage in their daily lives? What answers did medical doctors, philosophers and patristic writers give for their problems? This, the first monograph on the subject in English, explores the medical and material contexts for disability in the ancient world and discusses the chances of survival for those who were born with a handicap. It covers the various sorts of disability: mental problems, blindness, deafness and deaf-muteness, speech impairment and mobility impairment, and includes discussions of famous instances of disability from the ancient world, such as the madness of Emperor Caligula, the stuttering of Emperor Claudius and the blindness of Homer.

CHRISTIAN LAES is Associate Professor of Ancient History and Latin at the University of Antwerp, Belgium, and Adjunct Professor at the University of Tampere, Finland. He specialises in the sociocultural history of the Roman and late antique worlds. His previous books include *Youth in the Roman Empire: The Young and the Restless Years?* (Cambridge, 2014) and *Children in the Roman Empire: Outsiders Within* (Cambridge, 2011).

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CHRISTIAN LAES

University of Antwerp



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Preface

‘More than a billion people in the world today experience disability.’ Expressed in figures – more than 1,000,000,000 people – it makes an even greater impression. The World Health Organization’s first *World Report on Disability* from 2011 is clear: around 14.2 per cent of the current world population are confronted with disabilities. In the description, any reference to pain is carefully avoided: ‘to experience a disability’ is the preferred formulation, and not ‘to suffer’. According to the report, cultural and environmental factors are crucial. Something that is a disability for a person in a given environment and in specific circumstances need not be a disability in other situations or surroundings.

With a land area of 6.5 million km², the Roman Empire covered about 4.36 per cent of the total land surface in the world. It was one of the largest empires in ancient times, in addition to being the most resistant and long lived. Millions of people from the Roman Empire must have experienced functional disabilities, and the Romans were confronted with these people – but where are these people with disabilities? In a recent and masterful overview of physical well-being in the Roman Empire, the term ‘disability’ is not mentioned even once.¹

In 2008, when I ventured into what was then a largely uncultivated domain of disability history, one thing became immediately clear. This is a delicate subject, and one that (at the very least) incites curiosity and often engaged reactions. Of all the questions that have been sent to me after lectures or publications, two have remained particularly on my mind: whether I ‘regarded myself as experiencing a particular disability’ (note the politically correct wording) and whether I had completed any medical training. My reply to both questions was negative. In both cases, however, the question was much more important than the answer. The subject calls on our human empathy, and anyone who feels involved will find it very difficult

¹ Scheidel (2012). See now also Pudsey (2017).

to maintain the proper distance. Even finding the right terminology with which to mention certain things is a difficult exercise in balancing.

Handicapped people or people with functional disabilities? Blind or visually impaired? The topic also assumes at least some medical background. Without the necessary 'hard' material facts on ecology, demography and the human body, such studies are likely to become mired in pedantic and/or purely constructionist approaches that appear to lack any connection with reality. But this book is obviously a historical study. It is not a medical-biological treatise seeking to retrace as many people with disabilities from the past as possible. Knowing that there were also blind people, deaf people or people with speech defects in the past does not require any historical work at all.

During my research, I made a wonderful discovery: a synthetic work on people with disabilities in the Roman world does not yet exist. This book aims to be no more and no less than the first synthesis for a domain in which ancient history has long lagged behind. It offers a thorough and much-needed methodological introduction, outlines the medical-material backdrops of the ancient world and searches for chances of survival and the difficult first days after birth. Thereafter, disabilities are approached in a conventional manner, from head to toe: mental and intellectual disabilities, blindness, hearing disorders, speech problems and mobility problems. Each chapter zooms in on a variety of facets: daily life, preconceptions and the theoretical thinking of philosophers and Church Fathers, physicians and jurists with regard to the disability in question. The conclusion goes in search of possible breaking points in a history that initially appears to be of particularly *longue durée*. For those wishing to discover 'remarkable life stories', an extensive catalogue of people with disabilities in ancient times has been included in the form of an index of persons. Throughout the book, stories receive a great deal of attention: each chapter opens with the biography of a person who could be regarded as the 'historic icon' for the disability being described. The footnotes, the indices and the bibliography are intended to make this book a convenient reference work.

The lack of an ancient concept of disability serves as a unifying theme throughout this work. I demonstrate how, in the absence of such a concept, people in ancient times were less likely to be placed into 'boxes' and were more likely to be involved in everyday community life. I am nevertheless not blind to the fundamental experience of 'being different' and the limitations that the body can impose upon us. In this respect, the lives of people with disabilities in antiquity involved a continual balance between integration and exclusion.

It obviously becomes clear that the sources of our knowledge in this area are less limited than we often think – though ancient historians dealing with the subject of disabilities are indeed faced with some serious limitations involving the sources.

I would like to close this preface with an expression of gratitude. Thanks go to the anonymous referees of both Davidsfonds Uitgeverij and Cambridge University Press for many valuable suggestions. To Katrien De Vreese, Dirk Remmerie and the fabulous team from Davidsfonds for their concern for publishing academic work that can also appeal to a broad audience. I am particularly grateful to Dr Michael Sharp and the whole team of Cambridge University Press, not only for accepting this book but also for revising the English version which was kindly supplied by the Linguapolis team of the University of Antwerp. Both the University of Antwerp and the Universitaire Stichting generously funded costs involved in the translation of the English. Thanks also go to my Finnish colleagues from the Tampere research team ‘Religion and Childhood: Socialisation in Pre-Modern Europe from the Roman Empire to the Christian World’ and to the Institute of Advanced Social Research of the same university – the book took shape within this wonderful environment. To many colleagues in Belgium and abroad, and particularly the small group of specialists in disability history for the Graeco-Roman world, whom I was honoured to welcome to the University of Antwerp on 5 and 6 September 2011 for the conference ‘A Capite ad Calcem: Disparate Bodies in Ancient Rome’.

To my students, particularly to Dorien Meulenijzer and Bert Gevaert. To friends and family, who add colour to life every day: my brother and sister-in-law, nephew and niece. And obviously to my dear parents, without whom none of this would have been possible.

Abbreviations

The abbreviations of editions of sources are in line with the standard lists named below, in which the reader will find all bibliographical data of the editions used.

Greek inscriptions according to *Supplementum Epigraphicum Graecum. Consolidated index for volumes XXXVI–XLV (1986–1995)* (ed. J. H. M. Strubbe; Amsterdam, 1999), pp. 677–688, and the subsequent volumes of *SEG*.

Latin inscriptions according to *L'Année Épigraphique* (2004) (Paris, 2007), pp. 699–705, and the *Epigraphische Datenbank Frankfurt (EDCS)* (www.manfredclauss.de).

Papyri according to the *Checklist of editions of Greek, Latin, Demotic and Coptic papyri, ostraca and tablets* (ed. J. F. Oates et al.; Oakville, CT, 2001) (<http://scriptorium.lib.duke.edu/papyrus/texts/clist.html>).

For Greek and Latin authors, names and titles of works have been quoted in full. For most literary works, the most usual English title is used, while for most of the medical works from the Hippocratic corpus and by Galen, the standard title in Latin is given. Only in the case of Christian texts that are difficult to trace are the volume and page numbers of the edition in the *Patrologia Latina* (PL) or *Patrologia Graeca* (PG) stated.

Non-Literary Sources

<i>AE</i>	<i>L'Année épigraphique</i>
<i>BGU</i>	<i>Ägyptische Urkunden aus den Königlichen (later Staatlichen) Museen zu Berlin, Griechische Urkunden</i>
<i>CIL</i>	<i>Corpus Inscriptionum Latinarum</i>
<i>IGUR</i>	<i>Inscriptiones Graecae Urbis Romae</i>
<i>ILS</i>	<i>Inscriptiones Latinae Selectae</i>
<i>O. Claud.I</i>	<i>Mons Claudianus. Ostraca Graeca et Latina I</i> (J. Bingen, A. Bülow-Jacobsen, W. E. H. Cockle, H. Cuvigny, L. Rubinstein and W. Van Rengen)

<i>P. Aberdeen</i>	<i>Catalogue of Greek and Latin Papyri and Ostraca in the Possession of the University of Aberdeen</i> (E. G. Turner)
<i>P. Berl. Möller</i>	<i>Griechische Papyri aus dem Berliner Museum</i> (S. Möller)
<i>P. Leipzig</i>	<i>Die griechischen Papyri der Leipziger Universitätsbibliothek</i> (C. Wessely)
<i>P. Mich.</i>	<i>Michigan Papyri</i>
<i>P. Oxy.</i>	<i>The Oxyrhynchus Papyri</i>
<i>P. Ross. Georg.</i>	<i>Papyri russischer und georgischer Sammlungen</i>
<i>PSI</i>	<i>Papiri greci e latini</i>
<i>P. Tebt.</i>	<i>The Tebtunis Papyri</i>
<i>SB</i>	<i>Sammelbuch griechischer Urkunden aus Aegypten</i>
<i>SEG</i>	<i>Supplementum Epigraphicum Graecum</i>

Introduction

A Problem of Terminology

Contemporary Terminology

Asking ordinary people about their views and interpretations – Socrates was already doing it – remains a valuable exercise for the historians of *mentalités* of the twenty-first century. What do contemporary people regard as disabilities?

One answer relates to the permanent and incurable nature of handicaps. According to this view, a handicap is something that a person must bear for a lifetime. This poses a problem. We do not usually refer to a person with incurable cancer as being ‘disabled’. Neither is the term used for chronic illnesses.¹ In medical historical terms, the irreversibility of an affliction is changing rapidly. Cochlear implants have made it such that nearly no one in our Western society is completely deaf. For ancient physicians, incurable afflictions fell completely outside the doctor’s domain. As we shall see, they made exceptions only for mental afflictions.²

A second answer refers to employment incapacity or exclusion from social life. This raises problems as well. The integration of people with functional disabilities into the labour market, as well as into broader society, is an important objective in contemporary Western society. In order to achieve this objective, however, we divide these people into categories; even if they have found employment and built a busy social life, we continue to categorise them as ‘different’. In ancient and agrarian

¹ On cancer in antiquity, see Retief and Cilliers (2001) and (2011); Karpozilos and Pavlidis (2004). Ancient doctors did not usually distinguish between malignant and benign tumors, and treated tumors according to the science of bodily humours. See Celsus, *On Medicine* 6.28.2; 7.7.7. For a remarkable case, including the mention of possible amputation due to breast cancer, see Augustine, *City of God* 22.8. Ancient doctors obviously distinguished between chronic and acute diseases. See Stok (1996: 2324).

² On ancient medicine and incurability, see von Staden (1990) and van der Eijk (2004). For mental afflictions in this context, see van der Eijk (2013).

societies, as many people as possible were put to work in the production process. Shouldn't we thus be much less inclined to speak of disabilities with regard to such societies?

A third answer (which comes closest to modern sociological and medical definitions) holds that disabilities are often a matter of personal interpretation. Something that is a handicap for one person need not be for another. This answer is essentially a matter of avoiding discriminatory labels, even to the point of changing ordinary language usage into politically correct terminology. For historians, this answer offers both opportunities and challenges. It is important to reconstruct a society's past interpretations (whether discriminatory or not) in order to reveal where these people drew the boundaries between 'ordinary' and 'abnormal', and even between 'normal' and 'abnormal'.

Should science not provide us with more solace in this material than we are offered by popular language usage? We should at least expect physicians, sociologists, lawyers and advocacy groups to provide well-delineated definitions of handicaps. The use of this term is fairly recent, however, with the first reference dating from the seventeenth century in the context of a game of chance. Two objects were set into play. For example, a referee would determine that the worth of a hat was seven pennies less than the worth of a coat. Two players would then place their hands in a cap. An open hand meant that the deal had been accepted, and a closed hand indicated refusal. The first player to withdraw an open hand from the cap would receive the objects, plus the money that had been wagered. If both players revealed an open hand, the referee won the money. The term also appears in the context of horse racing. In order to make races more exciting and balanced, book-makers in the period after the First World War started assigning additional weight to stronger horses or allowing a head start to slower animals.³

We shall now consider three definitions from wide-ranging entities.

Online medical dictionaries define the term 'disability' as 'a physical, mental, or emotional condition that interferes with one's normal functioning'.⁴

The definition adopted by the United Nations draws heavily upon the third answer mentioned above, concerning the relativity of the concept of handicap/disability:

The term persons with disabilities is used to apply to all persons with disabilities including those who have long-term physical, mental, intellectual or sensory impairments which, in interaction with various attitudinal

³ Hubert (2000); Gazzaniga (2004: 642–643).

⁴ <http://medical-dictionary.thefreedictionary.com/handicap>.

and environmental barriers, hinder their full and effective participation in society on an equal basis with others. The drafters of this Convention were clear that disability should be seen as the result of the interaction between a person and his or her environment. Disability is not something that resides in the individual as the result of some impairment. This convention recognizes that disability is an evolving concept and that legislation may adapt to reflect positive changes within society. Disability resides in the Society not in the Person.⁵

Several striking examples are presented for this thesis: a person who can see only with the assistance of lenses or spectacles is handicapped in societies or eras in which such devices are lacking. A child may demonstrate learning disorders due to the inadequacy of the instruction offered or to the limited vision of teachers or parents.

Finally, the Flemish Agency for Disabled Persons (VAPH) also defines 'handicap' as a problem of participation, with reference to the somewhat vague character of the term.⁶

If handicap is indeed an umbrella term (as posited by the World Health Organization), this allows ancient historians to pose challenging questions. For example, Garland refers to figures from the United States indicating that one out of every six people in that country suffers from a handicap – slightly more than the 14 per cent claimed by the World Health Organization for the world population as a whole. This is not necessarily surprising, as nearly all learning disorders and social handicaps – from shyness to hypersensitivity or a broad array of phobias – fit within this definition, at least to some extent. Julius Caesar was ashamed of his premature baldness, and he tried to disguise this deficiency by combing his hair forward and, later, by wearing a crown of laurel. The Roman emperor Hadrian originally allowed his famed philosopher's beard to grow because he wished to cover a birthmark.⁷ Clearly, we might label such conditions as disabilities, though Romans would obviously not, given that many of our subtle classifications were simply unknown to them. If we could take a time machine back to the Roman world, however, we would be able to distinguish more handicaps than could be observed in our Western society. Infections, unhealed fractures and diseases that were difficult or impossible

⁵ www.un.org/esa/socdev/enable/faqs.htm. According to the World Health Organization, not being able to participate in society or labour is what typically causes a disability. Also, the WHO strongly point to the culturally determined character of the term. See www.who.int/nmh/a5817/en and World Health Organization (2011).

⁶ www.vaph.be/vlafo/view/nl/20887-Wie+kan+een+beroep+doen+op+het+VAPH.html.

⁷ Suetonius, *Caesar* 45; SHA, *Hadrian* 26.1.

to cure would have left a large number of people to lead what we would consider a deficient existence.⁸ Measuring ourselves by ancient standards, therefore, we would have fewer disabilities, while the ancient world would have many more, if measured according to modern views.⁹

Anyone adopting such definitions as that of the World Health Organization for purposes of historical study, however, would face a serious methodological problem. Homosexuals in Victorian England, black people in the South of the United States in the nineteenth and twentieth centuries, Jews under the Nazi regime and lesbian women in ancient Greece and Rome – all of these groups fit perfectly within the framework of contrasts and exclusion. Within their respective societies, these groups were certainly confronted with serious impairments. Nevertheless, who would expect to find homosexuals, people of colour, Jews or lesbians in a study of disabilities in the past?¹⁰ Anthropologists note that, in certain cultures, twins were regarded as a bad omen, and therefore eliminated. In such contexts, should being a twin be regarded as a handicap?¹¹ Although this interpretation could be used to write an interesting history of exclusion and discrimination, it does not provide a foundation for a history of disabilities. On the other hand, does this imply that it is simply impossible to write a history of handicaps, given that the concept is so subjectively coloured and subject to change?

For the purposes of this book, I delineate the subject to some extent by adopting a practical approach that nevertheless provides the best approximation of general notions concerning handicaps. This implies a classification into the following categories:

1. Physical handicaps/mobility handicaps
2. Sensory handicaps (visual, auditory)
3. Speech disorders
4. Learning disorders or intellectual handicaps
5. Mental disorders
6. Multiple impairments (often a combination of the above-mentioned categories)

⁸ The Old Testament contains striking examples of the crippling effects of broken bones. See Deut. 33.11: 'Crush the loins of those who rise against him and of his foes, so that they rise no more!' and 2 Sam. 3.29: 'May the House of Joab never be free of men . . . whose strength is in the distaff' (*New Jerusalem Bible*).

⁹ Laes (2008b: 89–90); Garland (2010: 6–7).

¹⁰ Boehringer (2004) has studied 'lesbian' women from antiquity within the framework of ancient views on monsters.

¹¹ Harris (1994: 5 n. 35) offers anthropological parallels for the elimination and exclusion of twins. For the Roman context, see also Seneca the Elder, *Controversiae* 9.3, and Pliny the Elder, *Natural History* 7.47 (on the name Vopiscus). See also Witt (2011) on twins as 'disability' in antiquity.

Comparative anthropological and ethnological studies adopt more or less similar frameworks.¹² The fact that this categorisation does not correspond completely to the intellectual frameworks of the periods under study need not pose an insurmountable obstacle. The history of sexuality in ancient times has been a domain of intensive study, even though neither the Greeks nor the Romans had any terms for sexuality.¹³

Moreover, the medical websites and reports of the World Health Organization alert users to outdated, discriminatory or offensive word usage. For this reason, there is more than a negligible risk that the reader will cast this volume aside. According to some, it would be better to avoid such terms as 'deaf-mute', 'blind' or even 'disability/handicap', instead replacing them with such descriptions as 'deaf', 'visually impaired' and 'functionally impaired'. On this point, it could be argued that such words are simply unavoidable in historical studies, as they have been in use for centuries (although this does not imply that we must adopt such words as 'backwards', 'imbecile' or 'idiot' – which were originally psychiatric terms that later came into common usage). Based on his own research and years of experience in the field of special education, the Flemish historian Ben Wuyts chooses to use such terms as 'handicap' or 'handicapped' (translated from the Dutch): 'these designations deserve preference over any fashionable language or extreme linguistic purism. They are accurate, respectful designations in proper general Dutch, and they refer to a vision of offering opportunities to people with a disability.'¹⁴

In anglophone circles, historians have opted to distinguish between 'disability' and 'impairment'. This distinction reconciles interpretations concerning the environmentally specific factors of a limitation with approaches of a more biological/anatomical nature. The term 'disability' refers to the socially determined character of an affliction, while 'impairment' refers to biological/physical similarities across time and cultures. In other words, people who cannot see are to be found in every culture.

¹² Neubert and Cloerkes (1994) distinguish physical disabilities, sensory disabilities, defects of the genitalia, intellectual disabilities and mental disabilities.

¹³ As such, this book approaches disability as a segmentary field that is meant to produce knowledge on social groups which tend to be 'marginalised', rather than as a new Dis/ability History with the potential to fundamentally change our general approach to history. See Nolte, Frohne, Halle and Kerth (2017) for a very rich volume on (medieval) disabilities, that for its methodological approach is indispensable for ancient historians too. Also Kuuliala, Mustakallio and Krötzel (2015) offer an excellent terminological discussion on words and concepts of infirmity in antiquity and the Middle Ages.

¹⁴ www.dewerksbank.be/Projecten/Empower/Personenmeteenhandicap/tabid/156/Default.aspx (translation from the Dutch).

Blindness is thus an impairment that these people share with each other. Nevertheless, the question of whether blindness is also a disability very much depends upon the cultures and the societies in which they live.¹⁵

Ancient Terminology

Any search for Greek or Latin terms coming anywhere close to the modern concept of disability would be in vain. In the case of the latter term, the focus lies on the body's physical and cognitive limitations which make it unable or unfit for work. In a 'healthy' modern state, such a condition is considered as undesirable. On the contrary, pre-modern concepts focus on bodies being marked or blighted by physical or mental deviance.¹⁶ Ancient historians must therefore resort to vague terms in the semantic fields of 'weak', 'helpless', 'deformed/defective', 'sick' or 'unhealthy'. Although dozens of these terms are available, the search also yields entire series of passages that are of little use for this study. Moreover, ancient authors say almost nothing about the congenital character of the defect; we can never know whether the handicap being described was congenital or caused by other circumstances.

The classical languages obviously do contain words referring to visual impairments, deafness, speech problems, mental disorders and mobility problems. In many cases, there are more than one might initially expect.¹⁷ Terms referring to mental defects are notoriously extensive and ambiguous.¹⁸ More than ten words or descriptions existed to denote both deaf-muteness and speech defects. An initial thorough search for terminology for visual impairment yielded about 150 Greek and Latin terms. This offers unexpected opportunities for ancient historians. In the past decade, the possibilities of database research have increased enormously. We now have access to powerful research tools, including the Library of Latin Texts (LLT), the *Thesaurus Linguae Graecae* (TLG), the *Acta Sanctorum* (ASS), the *Bibliotheca Teubneriana Latina* (BTL), *Patrologia Latina*

¹⁵ The distinction between disability and impairment is now firmly rooted in the history of disabilities. It is made consistent by Neubert and Cloerkes (1994) in their anthropological study. For the Middle Ages, this distinction provides the unifying theme for the work of Metzler (2006), (2013) and (2016). Rose (2003) also uses it in her study of ancient Greece. However, others have pointed to the fact that impairment too is not a purely medical, unchanging and ahistorical 'fact'. See Hughes and Paterson (1997) and Metzler (2017).

¹⁶ Richardson (2012: 5–6) for the same issues regarding the Arabic term *'āha*.

¹⁷ A convenient list appears in Garland (2010: 183–185).

¹⁸ The ancient lexicographer Pollux offers a long list: *Onomasticon* 120–122. On problems of terminology, see Wells (1964: 129) and below p.46, 66–72.

(PL) and *Patrologia Graeca* (PG) for literary sources; the *Clauss-Slaby Epigraphik-Datenbank* (EDD) for epigraphy, the *Duke Databank of Documentary Papyri* (DDBDP) and many others. The list is not even exhaustive. For research on sociocultural history, searchable databases have been truly revolutionary. Whereas, in the past, months of reading would be required in order to stumble upon a significant passage, a properly targeted query can now return the necessary material at the press of a key. It nevertheless remains a diligent chore that requires a thorough knowledge of the source languages. At least now, however, ancient historians are able to start working on unsuspected new texts, while for decades science has largely focused on passages that have withstood the sifting of the major manuals and encyclopaedias of the nineteenth century.¹⁹

Ancient Definitions Nonetheless? Monsters and Teratology

In a few rare and specific cases, ancient authors appear to have gone in search of definitions for what we would consider handicaps. They did this in connection with teratology or monsterology, and usually in situations in which establishing a difference would have had a direct impact on day-to-day decisions: the legal context.²⁰

The latest volume of the *Digest* offers a definition of the concept *ostentum* (monster/beast) according to the interpretations of the jurist Ulpian. The context in which we should place the commentary by Ulpian is not entirely clear:

Labeo defines *ostentum* as follows: everything that is born or rendered counter-natural. There are thus two types of *ostenta*. One refers to everything that is born counter-natural (e.g. a being with three hands, three feet or some other counter-natural body part). The other type of *ostentum* is what the Greeks referred to as *phantasmata* (apparitions): things that appear to be marvellous. (*Digest* 50.16.38; Ulpian)

Although this definition is not exceptionally clear, it does at least imply that someone could become a ‘monster’. Another passage from Ulpian clearly shows why lawyers were interested in such definitions. According to the *ius trium liberorum*, a result of the Augustan laws *lex Iulia* and *lex*

¹⁹ See the website of Meulenijzer (2012) for the extensive series of terms relating to visual impairments. Laes (2011g) calls for bringing together an exhaustive body of all passages for the file on deaf-muteness. See also Harper (2011: 18–19) on the new opportunities offered by digital sources (in this case, for studies of slavery in late antiquity).

²⁰ Gourevitch (1998); Allély (2004b: 90–95); Laes (2008b: 89–91).

Poppaea (from 18 and 9 BC, respectively), Roman fathers and mothers of three children received special privileges. But when was a child regarded as having truly been born?

One might ask: if a woman gives birth to a monstrous, deformed or weak child (*portentosum vel monstrosum vel debilem*), or a baby with an unusual appearance or cry, should the delivery be of any advantage to her? The best opinion is that such deliveries should also be advantageous to the parents. They cannot be blamed, as they have done what they were supposed to do. The mother should also not be blamed because the delivery proceeded badly. (*Digest* 50.16.135; Ulpian)

Once again, there is no clear definition concerning exactly what an abnormal birth was. What was to be said of birthmarks, polydactyly or hermaphroditism? In the text cited above, a ‘monster’ appears to be a baby that in no way resembles its parents (or even a person), being more reminiscent of an animal (is the unusual cry the sound of an animal?).²¹ What is actually at play here is the philosophical paradox that can be explained with the case of grains of sand or hairs. Although no one would deny the existence of a beach or a beard, how many grains of sand or hairs are needed in order to speak of a beach or a beard, respectively? For Ulpianus, ‘monsters’ existed, although it was not easy to provide any precise definition of the concept. Everyone intuitively thought that a child with eleven fingers was less ‘unusual’ than was a seriously deformed baby. In Ulpian’s view, an exact definition was not particularly important. The birth continued to count as such, and the parents could take it into account for the *ius trium liberorum*. This was not the case according to the jurist Paulus, however, who wished to make an exception only for children with polydactyly.²²

On 17 November 530, however, the Roman emperor Justinian issued a decree establishing the inheritance rights of a newborn child whose father had died without including the child in his will. In typical Roman casuistry, one might wonder what would happen if such a child had been born but died soon thereafter. Would the father’s original will still be invalidated? Justinian decreed that this would indeed be the case, ‘under the condition that the child was born alive without being a monster or a beast’

²¹ Chappuis Sandoz (2008: 22) refers to parallels with Aristotle, *On the Generation of Animals* 4.3.767a35; 769b10 (monsters do not resemble their parents); 4.3.769b8–10 (they look more like animals than human beings).

²² Paulus, *Sententiae* 4.9.3. See also *Digest* 1.5.14 (Paulus).

(*ad nullum declinans monstrum vel prodigium*).²³ Once again, one could imagine endless discussions.

As we shall see, ancient physicians, philosophers and Church Fathers also had a special interest in the phenomenon of monsters or beasts. For other domains as well, ancient peoples made a 'practical' distinction. In the world of the myths, satyrs, werewolves, witches and bogeymen were 'special monsters', as they most closely resembled human beings.²⁴ In an exceptional passage, the historian Diodorus Siculus possibly provides a distinction between a disease (*pathos/nosos*) that could be treated and a monster or marvellous apparition (*teras*). At any rate, the author does note that hermaphroditism is a medical affliction, arguing that nature would not tolerate a truly bisexual form of existence.²⁵

Nevertheless, such thinkers did not come very far beyond definitions concerning the counter-natural – a notoriously difficult concept. Their interest is related to the 'wonders of nature' and the unlimited possibilities with which Mother Nature (or God) surprises us. It was thus not related to the daily lives of their disabled fellow humans. A practical definition of health, which serves as a criterion for 'normal functioning' within society, can be found in the writings of the physician Galen: 'A state in which we have no pain and are not impeded in the activities of our lives, we refer to as health ... Unimpaired functioning is the best definition of health.'²⁶

In another context, ancient authors were indeed concerned with a possible distinction: the sale of slaves and the possibility of annulment if defects became known. Gellius, who writes from an interest in the exact meanings of words and literary passages, notes that two concepts are at play: *morbus* (disease) and *vitium* (error, defect). *Morbus* refers to a counter-natural state that rendered the body of a slave less useful for work. A disease can affect a part of the body (as with blindness or gout) or the entire body (as with fever). Anyone suffering from a disease (*morbosus*) should also be regarded as suffering from a defect (*vitiosus*). The converse does not necessarily hold: stutterers and horses that bit (!) were regarded as suffering from disturbing defects, but not as sick. Casuistry emerges in this case as well. A master unknowingly purchases a eunuch. Could he have the purchase annulled because his slave is a *morbosus*? Yes, because infertile sows must also be returned to the seller. And sterile female slaves?

²³ *Codex of Justinian* 6.29.3. ²⁴ Cherubini (2012).

²⁵ Diodorus Siculus, *Library* 32.12.1 and 10–12. See Graumann (2013: 190) on this passage.

²⁶ Galen, *De sanitate tuenda* 1.5 (6.25–30 Kühn).

According to the lawyer Trebatius, the sale could not be cancelled if they were infertile by nature, although it could be cancelled if a disease had rendered them incapable of bearing children. Other writers disagreed with Trebatius, regarding every infertile slave as sick. Near-sighted people are also addressed. Some lawyers regarded this as a disease (resulting in the annulment of the sale), while others did not. A similar discussion concerned slaves who were missing teeth. With a certain element of agreement, Gellius reports the definition provided by the lawyer Masurius Sabinus: 'a deaf-mute or people with defective or injured limbs that render them less suitable for work should be regarded as "sick". One who is near-sighted by nature, however, is just as healthy as one who walks somewhat more slowly than the average person.' Other definitions that treat a *morbus* as being of a temporary nature (with a *vitium* being persistent) receive no support in Gellius' view, however, as they would imply that blindness or the sterility of the eunuch would not constitute diseases, thus eliminating the possibility that the sale could be annulled.²⁷

Retrospective Diagnoses for Bones, Art and Texts: Solution or Problem?

Instead of proceeding from ancient words, categories or intellectual frameworks, it is also possible to start with the achievements of our current medical field. The physician's lens can be used to search for afflictions as they are to be found in ancient texts, artefacts or other material remains. This type of retrospective diagnosis is certainly popular. Many retired physicians have become involved in scavenger hunts for afflictions in the past. The first image of Down's syndrome on a medieval canvas? Traces of rheumatism in pre-modern paintings? Michelangelo and Spinoza as autistic individuals? People are eager to consume articles and books written in this vein. With regard to the Roman world, emperors have proven particularly attractive. Caligula's concentration disorders and behavioural problems as a result of epileptic seizures during his childhood. The stutterer Claudius, who suffered from the rare Little's Disease. The line in Hadrian's earlobe that indicates a heart defect. 'Next emperor, please!' is the provocative title of a scholarly article criticising such diagnoses.²⁸

²⁷ Gellius 4.2. There is extensive literature on the distinction between *vitium* and *morbus*, particularly in the works of the Roman jurists. See Lanza (2004); Elia (2007); Cocatre-Zilgien (2008); Gourevitch (2013a). Cf. below p. 52, 126 and 171.

²⁸ On Caligula: Suetonius, *Caligula* 50, and Benediktson (1991–1992). Cf. pp. 50–55. On Claudius and Little's Disease, see Gourevitch (1998: 468–470) and Garland (2010: 40–42). Cf. pp. 153–157. Hadrian's earlobe: Oppen (2008: 57–59). Karenberg and Moog (2004) for a

The interpretation of the biographies of emperors has since become quite advanced. In his physical descriptions of the emperors of the Julio-Claudian dynasty, Suetonius adopts a 'degenerative' model, with which he attempts to demonstrate that the dynasty deteriorated further with each ruler. From this perspective, therefore, he chooses to report – or even to exaggerate – physical and character traits of emperors. Given that Suetonius had privileged access to the imperial archives, however, it would be very strange if he had created his descriptions entirely without evidence.²⁹

From the medical-historical angle, retrospective diagnoses based on ancient texts have come under heavy fire. In various publications, Lutz Graumann has noted that medical diagnoses, both ancient and modern, are strongly tied to context and culture. When the Roman author and chronicler Julius Obsequens reports on the monstrous birth of a child with an open abdomen and visible internal organs, we should not automatically conclude that he is describing a case of gastroschisis. The description is too imprecise to allow this, as Julius Obsequens was writing out of cultic religious interest, and not out of medical curiosity. If we consult the ancient testimonies concerning hermaphrodites on this point, the most we can say is that, like ourselves, the authors ascertain that it is not always possible to draw clear boundaries between masculine and feminine. The particularly complex medical issue of intersex or disorders of sex differentiation (DSD) cannot be transposed to the past.³⁰ Moreover, with regard to the most famous 'transsexual' from antiquity, the sophist Favorinus of Arles, we know only that he spoke in a high voice, had no beard and exhibited an effeminate character. These traits might have been related to a quirky, self-selected style having to do with rhetorical trends. Even the report that Favorinus had no testicles can be explained in several ways from a medical perspective. Taken from a satirical and polemical passage, the report should also be read with a pinch of salt.³¹

In other words, despite the urge to engage in medical detective work by searching for afflictions and disabilities in ancient texts, such endeavours must be undertaken with great caution and, from a diagnostic perspective, remain exceptionally problematic. This is even more applicable for areas in

critical approach to the issue. Nevertheless, Ratcliffe and Milns (2008) venture to make such a diagnosis for Julius Caesar.

²⁹ The interesting article by Gladhill (2012) contains extensive references to the literary research on Suetonius' biographies of the emperors. Cf. below p. 37–42.

³⁰ Graumann (2008) on gastroschisis; (2013) on hermaphroditism. See also Graumann (2000) for a convincing critical approach to retrospective diagnosis in the *Hippocratic Corpus*.

³¹ Gleason (1995: 162); Fornaro (2009); Graumann (2013: 182–184).

which contemporary medical science itself is still uncertain. A study of learning disorders and intellectual handicaps in the past might therefore be even more precarious than the retrospective diagnosis of physical impairments.³²

Geographic and Chronological Parameters

This book investigates handicapped people in the Roman Empire during the period from about 200 BC to about AD 500. In 200 BC Roman expansion reached a level that made the Roman Empire the central power of the Mediterranean. Attempts at restoration in the sixth century notwithstanding, the Western Roman Empire had become a political fiction around AD 500. Many areas had irrevocably broken away. The theoretical and practical objections that could be raised regarding both the chronological and the geographical parameters of this study offer sufficient reason to consider both aspects.

Depending upon the level at which one wishes to investigate, the intended period could be regarded as either too broad or too limited. Until the Industrial Revolution, the daily lives of (disabled) people had exhibited many similarities throughout the centuries. This includes not being protected against any plague or infection.³³ Beginning in the nineteenth century, new demographic and material conditions, along with advances in the field of medicine, brought far-reaching changes. The living conditions in many contemporary developing countries can be regarded as anthropologically parallel to life in the past. The dividing line of AD 500 was inspired by political-institutional criteria, which are thus inapplicable to other domains. For many reasons, historians have advocated extending antiquity in the West to about 800.³⁴

Historians of disabilities have also referred to changes that accompanied Christianity. Christian authors emphasise the right to life for every individual, and they ponder the place of their handicapped fellow humans within God's creation. The concrete expression of the Christian notion of charity resulted in the first hospitals and institutes to which people with disabilities could also turn. In addition, the number of sources for disability history increased exponentially during late antiquity. The lives of saints

³² The book by Goodey (2011) is a sharp attack on the retrospective approach to intellectual disabilities. See Kellenberger (2011a and b) for a nuanced historical-theological approach to intellectual disabilities.

³³ Harper (2017) is a most convincing illustration of this.

³⁴ From the seemingly endless literature, I refer here only to Brown (1971) and Wickham (2009).

are packed with miraculous healings, centring largely on the imitation of the miracles of Jesus; blindness, deaf-muteness, demonic possession and lameness are prominent. In such stories, we read masses of concrete details concerning the lives of handicapped people – details that are much less common in the works of heathen authors. This book addresses primarily Christian authors, as the information they offer provides a better image of a period that they obviously shared with their non-Christian contemporaries. In some cases, this requires us to go beyond our broad period of approximately 700 years. Gregory of Tours (538–594) is perhaps the richest author for our topic, with hundreds of cases of miraculous healings, some which involve highly specific handicaps. The eloquent testimony on the life of a deaf-mute is found in the writings of the Anglo-Saxon monk the Venerable Bede (672/3–735), who is also regarded in some literary histories as the last author of the Roman world.³⁵

We must also extend the period of study in the other direction. Writings from the period preceding 200 BC play an important role in the Hellenistic and Roman educational ideal, which was remarkably uniform across the various schools in the Roman Empire. The blind Homer, Oedipus (who blinded himself) or the crippled and lame god Hephaestus were all part of the school literary curriculum, and they were used and reworked as models in writings from the Roman period. In this way, Greek and Roman texts and stories belonged to a shared cultural tradition, which began around 600 BC and continued through around AD 800.³⁶ In this respect, it is not surprising that four of the five ‘emblematic’ figures introducing the chapters in this book belong to Greek history. Moreover, the body of medical writings ascribed to Hippocrates is actually a collection of texts from the fifth through the first century BC. Even considering the ancient world alone, we may conclude that these writings were of major influence during the Roman period and extending far into late antiquity.³⁷

Culturally, the Roman Empire was a patchwork extending from the far corners of Britain to what is now Iraq, and from Friesland to the deserts south of Egypt. Given the exclusive focus of all ancient authors on

³⁵ Several contributions have recently been published on the role of early Christianity in the history of disabilities. See Crislip (2005) on hospitals; Kelley (2009); Kellenberger (2011a and b) for theological thought; Laes (2011b) on Gregory of Tours; Laes (2011g: 459) on Bede (cf. below p. 130–132); Horn (2013) on blind people.

³⁶ Harlow and Laurence (2010: 7).

³⁷ Jouanna (1992) is the standard work on the attribution and dating of the various Hippocratic writings.

Hellenistic-Roman culture – with its ubiquitous influence on buildings, art and imagery – it would be nearly impossible to develop an approach that would do justice to geographic diversity. There are nevertheless several exceptions. Papyrus texts from Graeco-Roman Egypt occasionally provide glimpses of the reactions of village communities to people who for one reason or another were regarded as deviant and dangerous. For example, a certain Gemellus was driven from his village ‘because of his evil eyes’. Factors that were very closely tied to local cultures were at play in such accounts.³⁸ Jewish culture, which was dispersed throughout the entire Roman Empire, obviously had its own rich tradition of thought concerning handicaps and deviations, from the purity rules of the Old Testament to the detailed provisions in the Mishnah and the Talmud. Although study of the Jewish tradition is a separate branch of the field of science, ancient historians should at least be familiar with it before setting to work on such a notoriously fragmentary area as the history of handicaps.³⁹

Sources

The Literary Sources: The House of Vovelle

When the beautiful nymph Arethusa was desired by the river god Alpheus, she was transformed into a spring. In a way, the same occurs with the ancient texts used in this book. Although none of the ancient authors was interested in the issue of handicaps, the historian’s desire transforms their texts into sources. This also means that these texts are taken out of their original contexts. This is necessary for historians of *mentalités* approaching history with the questions of their own time.⁴⁰ The ‘house of the history of *mentalités*’, a model developed by the French historian Michel Vovelle, shows how this can be done while respecting the original embeddedness of a text.⁴¹

For example, consider Titus Manlius Torquatus (ca. 386 BC?). As a young man, he was not particularly fortunate. Due to a speech impediment and a certain mental slowness, his father, the renowned Lucius Manlius Capitolinus Imperiosus, sent him to the countryside, away from his friends and the social life of the city of Rome. There, the boy grew up amid the

³⁸ Bryen and Wypustek (2009).

³⁹ A good starting point is offered by Ohry and Dolev (1982); Holden (1991); Abrams (1998); Gracer (2003); Olyan (2008); Kellenberger (2011a and b).

⁴⁰ Bettini (2002).

⁴¹ Laes (2011c) is an application of this model to five ancient stories about disabilities.

livestock in a crude, rural environment. In 362 BC the father, a former dictator, was tried before the Roman citizens, many of whom had suffered abuses at his hand. He was also excoriated for his callous behaviour towards his son. Nevertheless, this disadvantaged son would come to his father's rescue. He went to the house of the prosecutor, the tribune Marcus Pomponius. When he announced himself to the doorman, he was promptly admitted; people were convinced that he would bring even stronger charges against his father. All of a sudden, however, he threatened the tribune with a knife, forcing him to promise under oath to drop all charges against Manlius Imperiosus. The next day, when Pomponius announced to the citizens (under duress) that he was abandoning all charges, the citizens did not react with indignation. On the contrary, they praised the courage and generosity of the young Titus Manlius, who, as a faithful son, could not bear to see his father condemned. His act was a demonstration of true *pietas*. Titus Manlius himself became one of the greatest heroes of republican Rome, serving three times as a consul (in 347, 344 and 340 BC) and three times as a dictator (in 353, 349 and 320 BC). During a war in 360, he engaged in a duel with a gigantic Gaul. He beheaded his opponent and placed his *torque* (the typical Celtic necklace) around his own neck – an act that immediately earned him the nickname Torquatus. As a consul in 340, he had his own son sentenced to death. Against his father's orders, the young man had led an otherwise successful charge against the enemy. The army had only one punishment for such insubordination. Once again, public opinion lavished praise upon Titus Manlius Torquatus: as an army captain and statesman, he placed his honour and respect (*pietas*) for the Roman state above his love for his own son.

What could a historian of *mentalités* do with such a story? According to Vovelle, the lower layer (or floor) allows us to discover interesting factual information. Banishment to the countryside out of shame for a defect, the association that was made between speech difficulties and mental deficiencies, even the connection between people with speech defects and livestock – all instances can be found in various cultures. On the second Vovellian floor, one is confronted with popular interpretations and morality. Public opinion disapproved of the callous behaviour of the father. Solidarity within the family was apparently considered important: the boy was not guilty of anything, and the father should have treated him better. The upper floor considers philosophical, theological or scientific interpretations in a text. Livy (ca. 59 BC–AD 17), the narrator of this story, was there for this purpose. The entire episode is actually one big illustration of the importance of the Roman virtue *pietas*, which Manlius Torquatus

demonstrated under all circumstances: with regard to his father (who had treated him so badly), with regard to his commander (who had ordered him to engage the Gaul in a duel) and with regard to his son (by executing him, he demonstrated *pietas* towards his country). Adopting this type of layered reading for the story allows us to avoid naive interpretations and respect the identity of the author while nevertheless piecing together enough information for the subject of the history of disability. In this respect, it would be completely pointless to speculate about the affliction suffered by the young Manlius, to remark that he had become capable of fluent speech at least from the time of his visit to the doorman or to regard his brutal behaviour in the duel with the Gaul or towards his own son as a reaction stemming from frustration.⁴²

Epigraphical and Papyrological Sources

At first glance, inscriptions would not appear to constitute a very promising source for the study of handicaps. In the proud ancient culture of representation, people were not simply labelled as suffering from a handicap. Nevertheless, inscriptions obviously contain many proper names. The Romans had nicknames or *cognomina* referring to defects: Balbus or Blaesus (the Stutterer), Brutus (the Mute), Caecus (the Blind), Plautus (Flat-foot). About 44 per cent of the Roman *cognomina* refer to physical defects. These names had become hereditary as early as the third century BC, and they carried no shameful connotation for the bearer, as confirmed by the ancient authors themselves. The Greek writer Plutarch praises and provides a detailed discussion of this Roman name-giving custom. For him the practice had made it common for the Romans not to look down upon such physical defects as blindness or other physical disabilities.⁴³ Obviously, however, such nicknames could still become objects of political humour. For example, a bribery agent on the Campus Martius bearing the name Nummius (Coiner) was easy prey for the sharp humour of Cicero.⁴⁴ In many societies men and women of all social strata commonly had nicknames based on physical and mental impairments. Accidentally engaging in slander was surely a possibility.⁴⁵

⁴² Laes (2011c: 917–921) for a Vovellian interpretation of the story of Titus Manlius, as told in Livy 7.4.2–7; 7.5.1–9; 7.10 and 8.7.

⁴³ Plutarch, *Coriolanus* 11. See Esser (1961: 126) on this passage. Kajanto (1965) is the standard work on Roman *cognomina*.

⁴⁴ Cicero, *On the Orator* 2.257.

⁴⁵ Richardson (2012: 112–113) on Mamluk Egypt, but with references to many cultures.

The votive inscriptions that abound in ancient shrines constitute a special type of inscription for the purposes of this book. In many cases, grateful dedicants would tell in great detail about the afflictions from which the deity had healed them, with impairments and disabilities figuring prominently amongst them.⁴⁶ Moreover, imprecations on stone protected tombs from violation. Some curses contain explicit wishes that the desecrator will suffer from illness or disability.⁴⁷

Texts on papyrus bring us to Graeco-Roman Egypt, raising inevitable questions concerning the extent to which this province is representative of the Roman Empire. Medical papyri constitute a rich source, particularly for the history of ophthalmology. Countless petitions concern people with defects (and the reactions of their fellow humans). Perhaps such people were exaggerating in order to persuade the sitting judges that they were right and to convince them of their own misery. Many papyri also give personal descriptions, with handicaps appearing regularly amongst the remarkable physical characteristics.⁴⁸ Finally, curses on magical papyri are among the most vivid pieces of evidence for people's fear about becoming disabled (especially blind).⁴⁹

The Unique Language of Artefacts

For artefacts from antiquity, we have access to a vast, richly illustrated catalogue compiled by the Croatian physician Mirko Grmek and the French ancient historian Danielle Gourevitch. Countless afflictions, descriptions of which are sometimes found amongst the writings of ancient physicians, are listed here: hydrocephaly ('water head'), schisis (cleft palate or 'hare lip') and even the extremely painful Klippel-Feil syndrome, in which the fusing of two neck vertebrae causes limited motor function and possible auditory and mental problems.⁵⁰ Although the results of this interdisciplinary project are spectacular, it is important to remember that artefacts speak their own language. The mostly small artefacts discussed by

⁴⁶ See e.g. the studies by Herzog (1931); Edelstein and Edelstein (1945); LiDonnici (1995); Girone (1998).

⁴⁷ Strubbe (1997: xxvii–xxviii) on physical sufferings such as dropsy, blindness, madness and possibly pestilence.

⁴⁸ Strassi (1997); Cernuschi (2010); Arzt-Grabner (2012).

⁴⁹ See the evidence collected in the *Papyri Graecae Magicae* (PGM), 2nd edition, ed. K. Preisendanz and A. Henrichs (1972–1974). See Gager (1992) for translations and commentaries.

⁵⁰ Grmek and Gourevitch (1998: 228) on hydrocephaly; Grmek (1983: 111) and Grmek and Gourevitch (1998: 234–235) on cleft palates; Grmek (1983: 110–111) and Grmek and Gourevitch (1998: 209–210) on Klippel-Feil.

Grmek and Gourevitch are not anatomical models for medical students. We cannot know whether the artists were trying to depict medical realities in the objects they created. Once again, we are faced with the problem of retrospective diagnosis.⁵¹

Remarkable Bones: Osteology

Such diagnoses lend themselves more readily to the domain of bone research or osteology. Osteological findings have yielded exciting, even spectacular case studies. For example, in 1991, an abnormally long third-century grave was found at Fidenae near Rome. Further investigation of the bones revealed that the grave was that of a man who suffered from gigantism. With his height of 2.02 metres, his appearance must have been remarkable in a society in which the average height amounted to 1.67 metres. He had died at a young age (between the ages of sixteen and twenty), possibly due to the cardiovascular and respiratory problems that can accompany such afflictions. His burial site was located among other graves; his contemporaries had thus apparently not regarded him as an ‘odd case’. Unfortunately, archaeologists found no grave goods in close proximity to the bones that could have told us about the young man’s daily activities. The discovery of this ‘giant’ places ancient reports in a better context. According to Pliny the Elder, Naevius Pollio was so tall that he nearly died when the citizens swarmed around him to observe him as a ‘miracle’. Writing about his own time, Pliny recalled the Arabian Gabara, who was around 9 *pedes* and 9 *unciae* tall – 2.90 metres. Emperor Maximinus Thrax (235–238) was also renowned for his tall figure.⁵² A boy aged six or seven from early Anglo-Saxon Spofforth (North Yorkshire) suffered from fibrous dysplasia, which made the left side of his face swollen and abnormally asymmetrical. In this case as well, however, he received a ‘normal’ burial, although a considerable number of adults with disabilities in the same period were buried in odd positions or liminal locations. Could local customs and/or the difference between childhood and adulthood have played a role here?⁵³ Many unanswered research questions remain in this regard.⁵⁴

⁵¹ The literature on these small artefacts is boundless: Mitchell (2013) provides an outstanding overview.

⁵² Minoza et al. (2012) on the giant of Fidenae. Pliny the Elder, *Natural History* 7.75 and *Historia Augusta* (*The Two Maximini*) 2.1. See Harper (2017: 75–79) on stature.

⁵³ Craig and Craig (2011) on the boy from Spofforth; Crawford (2010) and Hadley (2010) on the issue of the odd burial practices in early Anglo-Saxon England.

⁵⁴ Graham (2013) offers a primer for the Roman period.

Studies of a more statistical character include the investigations conducted in Dorchester, England (the ancient town of Durnovaria). A high frequency of scurvy, rickets and *cribra orbitalia* in young children suggests vitamin deficiencies that affected their comfort during adult life, at least for those reaching this stage.⁵⁵ Findings from Herculaneum have allowed extensive research on 139 skeletons of men, women and children. The study of these skeletons has mainly established the presence of traces of injuries due to intensive labour.⁵⁶

In the field of paleopathology, medical anthropologists search for afflictions such as those found in ancient skeletal remains: club feet and spina bifida are amongst the most common findings, although unhealed fractures are frequently found as well. A large amount of promising research has taken place in this field, although several problems remain. A few handicaps are inevitably underrepresented. Deafness, blindness and mental problems seldom leave traces in bones. These researchers also remain dependent upon the accidental character of the findings and the ancient funeral practices (inhumation versus cremation). Because the connection between symptoms and afflictions is not always clear, ancient historians are dependent upon the interpretations proposed by the osteologists. Nevertheless, these osteologists have emphasised that their findings provide evidence that people with handicaps did survive and that they were able to attain adulthood. This conclusion directly shatters the old stereotype of ancient societies systematically practising selective elimination at birth.⁵⁷

Frequency Lists, Ecology and Demography

Medical reference works and statistical data on handicaps are now easily searched on the internet. For example, the World Health Organization's website offers a wealth of data concerning handicaps throughout the world. These statistics might tempt us to estimate patterns in antiquity, a period for which we obviously have no statistical data.

Once again, caution is advised. Because we are people with bodies and limbs, we are subject to a certain *permanence biologique* that connects us to people from the past. We must nevertheless remain alert to differences. In Graeco-Roman Egypt, the number of brother–sister marriages was

⁵⁵ Lewis (2010). ⁵⁶ Laes (2008a: 235–237, 275–277).

⁵⁷ On the possibilities of osteology and paleopathology, see Grmek (1983); Dettwyler (1991); Roberts and Manchester (1995); Scott (2000); Charlier (2008); Laes (2008b: 101–102); Graham (2013); Laes (2015). On birth selection, cf. pp. 23–28.

uncommonly high. Such commitments must surely have generated more children with congenital defects than was the case in other regions of the empire.⁵⁸ In statistical terms, Down's syndrome is associated with higher maternal age at the time of delivery. Smoking during pregnancy can also play a role. Should we therefore be surprised that there is only one possible example from antiquity – a nine-year-old child from Brendon-on-the-Hill in Britain, possibly from the sixth century?⁵⁹ Regional factors (e.g. isolation from a community) can reinforce hereditary factors. Even today, the Greek island of Amorgos is still known for its relatively high number of deaf-mutes. Due to limited medical possibilities or lack of vitamins, cases of non-congenital blindness were undoubtedly higher in ancient times than they are in our Western world. For some regions, the proximity of marshes and rivers was also an aggravating factor for the development of river blindness. Each chapter of this book addresses the context-specific frequency of handicaps.

A New Discipline?

In recent decades, the study of handicaps has become a fashionable discipline, with its own professors, institutes, professional journals and manuals. Following the medical-historical studies, which focused largely on detecting handicaps and afflictions in the past, studies of disabilities conducted since the 1980s have taken place primarily within the complex field of interaction between sociology, medicine, culture and political organisation. In the 1990s, disability history followed in the wake of studies on race, ethnicity and gender. In many cases, such works were given a strong emancipatory interpretation. This is also true of studies emphasising power and mechanisms of oppression. The insights and highly unique jargon of the French philosopher Michel Foucault (1926–1984) have played a particularly important role for the literary analysis of specific handicaps.⁶⁰

⁵⁸ Remijsen and Clarysse (2008) *contra* Huebner (2007). Scheidel (1996: 20) states that about 50 per cent of the babies born of brother–sister relationships die prematurely or suffer from relatively serious disabilities.

⁵⁹ Krausse (1998: 338) dates to the sixth century, Roberts and Manchester (1995) to the ninth century. See also Czarnetski, Blin and Pusch (2003). Extensive treatment of Down's syndrome, with possible images in paintings: Kellenberger (2011b: 62, 68–73). For images from antiquity, see Grmek and Gourevitch (1998: 223–230).

⁶⁰ Manuals on disability studies: Albrecht, Seelman and Bury (2001); Longmore and Umansky (2001); Jones and Webster (2010). For the non-Anglo-Saxon tradition, see Förhammar and

The field of ancient history is lagging considerably behind for this topic. The only available books are a general introduction for the Greek and Roman world and a monograph for the Greek world.⁶¹ The present book constitutes the first synthesis specifically for the Roman world.⁶² Nevertheless, researchers from the distant past have already made substantial contributions. The German ophthalmologist Albert Esser published numerous contributions in medical trade journals on eye afflictions in antiquity. His reference work on blindness (second printing from 1961) is still usable, due to the wealth of ancient passages that he collected. In the context of the Istituto Gualandi per Sordomuti in Bologna, Vincenzo di Blasio published numerous contributions on deaf-muteness in antiquity, many in almost untraceable publications, including a local newspaper appropriately entitled *Effeta*. The most complete review article on deaf-muteness by Giulio Ferreri dates from 1906. Despite their many methodological issues, today's sociocultural historians continue to benefit from studies by René Semelaigne (dating from 1869) and Johan Ludvig Heiberg (1927) on mental disabilities in antiquity. From time to time, fundamental contributions emerge in places one might not initially suspect. The books of the Flemish psychiatrist Jan Godderis, which were written in Dutch and thus little known in the Anglo-Saxon world, contain a wealth of information on psychic afflictions in the works of ancient physicians. Moreover, as clearly noted in the previous sections, recent decades have produced interesting studies on ancient notions about monsters, legal thought concerning handicaps, osteological findings and depictions of disabilities in ancient art.

With this book, I aim to offer new perspectives on various facets of an area of Roman society that has too often been overlooked. Following intensive database research and after reading countless passages from ancient texts, I attempt to sketch the contours of the lives of disabled people and how they were regarded by their fellow humans in the period from roughly 200 BC until AD 500. One common thread throughout the story is the absence of a category or term for 'disability'. At the same time,

Nelson (2004) and Van Trigt (2011). A concise overview is also provided by Laes, Goodey and Rose (2013: 5).

⁶¹ Garland (2010) is the second edition of a work that was first published in 1995. The new version contains bibliographic updates, but is otherwise largely unchanged. Rose (2003) is an outstanding book that integrates the anthropological insights derived from recent disability studies.

⁶² Detailed studies are in the various contributions in Laes, Goodey and Rose (2013). The conference, which was held in Antwerp in September 2011, brought together all specialists on the topic of disabilities in the Roman world. There were ten speakers.

I attempt to demonstrate how their physical functioning indeed caused these people to be confronted with their impairments. The image that emerges is thus two-sided. On the one hand, disabled people in antiquity were more strongly integrated into society; on the other hand, they were subjected to a wide variety of mechanisms of exclusion. I also hope that this book will offer more than just a collection of remarkable facts and titbits of information. I devote considerable attention to the manner in which handicapped people are dealt with in ancient texts. The above-mentioned Vovellian model of the house of the history of *mentalités* plays a crucial role in this regard. In other words, I regularly distinguish between popular interpretations and the theoretical discourse on handicaps, as found in the works of ancient physicians, philosophers and Church Fathers. My approach is also comparative and anthropological. In an increasingly globalised world, we must not turn a blind eye to the circumstances in distant worlds, particularly if these analyses reveal interesting parallels between the ways in which people coped with handicaps in antiquity and the ways in which handicaps are currently approached in developing countries. For the Eastern world, publications by the late Wimal Weerakkody, a congenitally blind professor of classical languages from Sri Lanka, and by M. Miles offer a wealth of information that ancient historians can use to their benefit.⁶³

Finally, I have opted to integrate late antiquity into my story. This inevitably raises the question of whether Christianity brought any changes during a turbulent transitional period. The book does not, however, constitute an exhaustive study of the early Christian sources. That would require at least another entire volume.

⁶³ The publications of M. Miles are particularly remarkable: out of principle, he has published hundreds of pages on the internet. Equally remarkable is Miles' protection of his own identity: his first name is not revealed anywhere. No connections with any place of residence or research institute can be traced.

*Conception, Birth and the 'Crucial' First Days***Survivors? Handicapped Babies within a
Regime of Massive Infant Mortality**

Massive infant mortality is one aspect of daily existence in which ancient society did not differ from other pre-industrial societies. The first days after birth were particularly precarious. Although we obviously have no archives from antiquity that would lend themselves to statistical demographic analysis, ancient historians have found a plausible point of comparison in the life-table simulations developed by the United Nations. The figures are sobering. Between 30 and 35 per cent of all infants did not reach their first birthday. About 50 per cent of all newborns reached their tenth birthday. About half of those who reached their tenth birthday could hope to reach the age of fifty, and one-third of them lived for sixty years or longer.

Demographers have recently proposed corrections to this model: the infant mortality rate was more likely to have been 20 per cent, while the mortality rate before the age of ten was higher. Ultimately, these models result in a mortality rate of around 35 per cent before the tenth birthday. The reality that parents frequently saw their newborns die remains the case.¹

The abandonment of infants was undoubtedly a frequent phenomenon in ancient Rome as well. Major disagreements exist concerning the exact figures. We must once again resort to simulations and reasoning based on standards of plausibility.² Foundlings could serve to secure the supply of slaves. One simulation proposes six million slaves in a total population of sixty million inhabitants.³ Taking into account the mortality rate amongst

¹ Laes (2011a: 23–27) for details on the discussion. The new models are treated by Woods (2007) and Parkin (2010: 112–113).

² From the voluminous literature, we mention only Eyben (1980–81); Harris (1994); Corbier (1999), (2000) and (2001); Evans Grubbs (2011); Vuolanto (2011).

³ According to recent estimates, the number of inhabitants in the Roman Empire grew from forty-five to sixty or seventy million in the reign of Augustus. See Scheidel (2007). An estimate of fifty million is often assumed for the sake of convenience. Cfr. p. vii, 24, 85 and 120. Note that Harper

slaves, their fertility and the number of fertile female slaves who were freed each year, the Romans are likely to have faced an annual deficit of 110,000 slaves. This was compensated for by 'new' slaves obtained through captivity (both within the Roman Empire and through importation from border regions) and through taking in foundlings and raising them as slaves. 'Voluntary' slavery was another solution. People from the 'poorer' population groups – estimated at 40 million – were more likely to abandon their children as foundlings. According to one estimate, this implies that nearly one out of every three mothers from this class had abandoned a baby at some time in her life. This number seems appalling and almost unsustainably high. Every figure of the simulation, however, is open to debate. What if slaves were not usually freed until a later age? If there were more slaves through captivity and abduction? If certain mothers systematically abandoned all of their children? The fact remains that the number of foundlings must have been painfully high relative to our modern Western standards.⁴

Data from later periods only reinforce this suspicion. The story of the founding of the Ospedale Santo Spirito in Sassia in medieval Rome is well known. In 1198, Pope Innocent III decided to open the facility, because he was aghast at the large number of dead infants that were being found in the nets of fishers in the Tiber. Beginning in the fifteenth century, the archives of the Florentine Ospedale degli Innocenti reflect a massive influx to this foundling home. In 1552, it was housing 1,200 foundlings. For a total population of 60,000 inhabitants, this amounts to nearly 2 per cent – not counting the fact that these figures refer only to surviving foundlings.⁵

This harsh reality does not, however, imply that Roman society was indifferent to the death of its youngest members. Archaeological studies on funeral practices for infants suggest the opposite. In some regions, young children were assigned separate burial sites, some in special shrines. Others were buried in the immediate vicinity of their homes, or even in special jugs (the burial custom of the *enchytrismos*). Latin epitaphs contain specific choices of words and special attention for young children.⁶ Massive infant

(2017: 30–31) has now proposed sixty million in the reign of Augustus, and seventy-five million a century and a half later.

⁴ For the debate on the number of abandoned children and slavery: Harris (1999) and Scheidel (1997). McKeown (2007: 124–140); Hermann-Otto (2009) and Laes (2011d) present a *status quaestionis*.

⁵ Bolton (1994) and Panter-Brick and Smith (2000: 41) on Santo Spirito; Cipolla (1993: 57–58) on the Ospedale degli Innocenti. Evans Grubbs (2013: 100) offers a thoroughly ghastly image of the presence of the corpses of infants in ancient Rome.

⁶ Dasen (2010) for a general overview of the burial of the youngest infants; Carroll (2011) and (2012) for Roman Italy. See also twenty contributions in Guimier-Sorbets and Morizot (2010). For inscriptions: King (2000); Laes (2007) and (2013b).

mortality can obviously lead to a sort of ‘habituation’. Nevertheless, anthropologists have also demonstrated that the seemingly detached reactions of cultural customs should not always be interpreted as the absence of emotions or sorrow. In many cases, interpretations of indifference are those of modern Westerners, who are not known for their capacity for direct empathy with people from ‘other’ and ‘foreign’ cultures.⁷

Nevertheless, none of this suggests many positive prospects for the fate of handicapped babies in antiquity.⁸ If so many infants already failed to survive or were removed in silence, what must the situation have been for those entering the world with defects? In popular perception, ancient society is frequently associated with infanticide or the elimination of weaker life. Upon closer examination, however, these perceptions are based on five passages, which are cited over and over again. Both Plato and Aristotle refer to the selection of newborns in a previous ‘utopian’ context of an ‘ideal’ state.⁹ Plutarch, from the first century AD, describes a selection procedure in Sparta. In a place known as Leschè, Spartan babies were inspected by the elders of the tribe. Infants who were “deformed or from low origins” were sent to the Apothetae, a place on Mount Taygetos, where they died a silent death. To ensure the health of future Spartan citizens, a double test was provided: babies were bathed in wine instead of in water, such that epileptics or weaklings would soon be noticed.¹⁰ Plutarch, however, lived hundreds of years after the facts that he was describing. To him, Sparta is a ‘utopian ideal’.¹¹ Plato, Xenophon and other writers from the same period, who were infatuated with Sparta, did not report the selection procedure for newborns. We know that the Spartan king Agesilaus (ca. 443–360) was deformed and crippled, and that he was of remarkably small stature.¹² Also, Spartan infanticide has never been proven archaeologically.

For the Roman dossier, a passage from the Twelve Tables, to which Cicero refers, plays a crucial role: ‘if he should be killed, as a dreadfully deformed

⁷ Golden (1988) and (2011). ⁸ Laes (2008b: 92–99).

⁹ Plato, *Republic* 460c (selection); *Timaeus* 19a (possible return of such children); *Republic* 415c (‘unworthy’ infants were to be brought to the farmers by guards). Aristotle, *Politics* 7.1335b (law prohibiting the raising of children with defects). See Schmidt (1983–1984: 142–145) and Laes (2008b: 93).

¹⁰ Plutarch, *Lycurgus* 16.

¹¹ Huys (1996) is a thorough study of ancient utopias with regard to the selection of newborns.

¹² Plutarch, *Agesilaus* 2. See Luther (2000). Samama (2013: 240) believes that the king limped after an accident. The problem is that the term προσητάσας in *Agesilaus* 3.8 refers to both “hurting by striking against a thing” and “to be checked” or “suffer check”.

child according to the Twelve Tables'.¹³ Remarks by both Seneca the Elder and the philosopher Seneca leave nothing to the imagination:

Many fathers have the custom of abandoning babies who are of no use. Some are deficient in certain body parts, weak and without hope of survival. Their parents would prefer to throw them away than to abandon them. (Seneca the Elder, *Controversiae* 10.4.16)

We slaughter sick animals lest they infect our flocks. We destroy births that announce bad omens. We also drown babies if they are born weak or handicapped.¹⁴ I do not consider this hate, but a well-considered judgement: separating the useless from the sound. (Seneca, *On Anger* 1.15.2)

Is it worth mentioning that such texts were studied particularly eagerly in Nazi Germany. The German paediatrician Werner Catel (1894–1981) was also acclaimed as an 'outstanding physician' after the Second World War, but for his opinions concerning the selection of children. These ideas received considerable attention in the 1950s as well. At that time, scholars were seeking to absolve antiquity of any suspicion of eugenics and the elimination of the weak. Such discussions, however, say more about the way in which the classics were received than they do about what ancient writers actually thought. For example, it would be pointless to accuse ancient people of eugenics, given that they had no notion of the concept of race.¹⁵

One may obviously suppose that the majority of disabled babies did not survive the first few days. We now have access to such reference works as the World Atlas of Birth Defects, Eurocat and Online Mendelian Inheritance in Man (OMIM). These resources allow even non-specialists quick insight into all sorts of abnormalities that can emerge at birth, along with their symptoms and frequency, survival rates for newborns and differences that can be observed across regions.¹⁶ Approximately 3 per cent of all newborns in affluent Western countries suffer noticeable congenital abnormalities. Even in our Western world, survival is problematic in such cases. For ancient historians, it is easy to pore over lists and speculate about which abnormalities in the ancient medical context would have been associated with absolutely no chance of survival (e.g. heart problems in newborns). Findings from the Egyptian city Hermopolis include the

¹³ Cicero, *On the Laws* 3.8.19.

¹⁴ On drowning, see Ogden (1997: 13). In Attica, 175 infant skeletons were found in a well.

¹⁵ Peterson and Zankel (2003) and (2007) on Catel; Schmidt (1983–1984: 133–134) on Hitler and Sparta.

¹⁶ Eurocat (www.eurocat.ulster.ac.uk); OMIM (www.ncbi.nlm.nih.gov/omim); World Atlas of Birth Defects (www.fgg.eur.nl/medbib/WHO_world_atlas_of_birth_defects.html).

remains of a stillborn baby who suffered from anencephaly, the absence of a brain.¹⁷ We can imagine how, in ancient times, mothers, midwives and, in rare cases, physicians who had been summoned must have looked on helplessly, ascertaining that some babies were simply not viable. Did the midwife's art not include the ability to distinguish viable infants from those who would not survive? Discussions concerning these midwives are reluctant to go into what exactly they were expected to do in the latter case. We can be sure that the midwife observed the newborn carefully: whether it cried, whether all of the limbs could move, whether the body parts were in the proper proportion and whether all of the body openings were clear.¹⁸ In some cases, ritual and religious motives played a role as well. Livy and Julius Obsequens tell us of a wide range of 'bad omens' (*monstra* or *prodigia*): open abdomen or gastroschisis, hermaphroditism, half human/half animal, babies with beards, multiple births (some conjoined). Elimination and even ritual cleansing were frequent solutions.¹⁹

Nevertheless, there were survivors. In the [Introduction](#), the study of ancient artefacts was mentioned. Those examining artefacts for instances of congenital abnormalities soon discover a wide array of examples: Down's syndrome, cleft palates, dwarfism, hermaphroditism/intersex, short limbs, Klippel-Feil syndrome, polydactyly, microcephaly (abnormally small skull) and macrocephaly with hydrocephaly (water head). At the very least, ancient artists must have been aware of people with such handicaps.²⁰ Archaeological and osteological research has reinforced this impression. Such studies have indeed revealed the graves of people who suffered from remarkable physical defects from birth. Club feet were a relatively frequent phenomenon. In other words, archaeology sometimes suggests compassion and the existence of survivors.²¹

Some handicaps are not immediately apparent at birth. Examples include blindness and deafness. Anthropologists have noted that in such

¹⁷ Dasen and Leroi (2005) and Dasen (2009a).

¹⁸ Hippocrates, *On the Eight Months' Child* 10 (7.452–455 Littré); Mustio, *Gynaecology* 1.76; Soranus, *Gynaecology* 2.10. See Burguière, Gourevitch and Malinas, vol. II (1990: 85); Laes (2008b: 96). The 'Moro test', in which an infant is raised up and then allowed to fall backwards slightly in order to see whether the arms move, is noted in Mesopotamian texts. See Cadelli (1997: 18–19) and Kellenberger (2011b: 59–60).

¹⁹ Allély (2003: 132–134) (list); (2004b: 75–76) (list); (2003: 149–155) and (2004b: 79–90) (the fate of these babies) in the Republican and Imperial periods, respectively. On the impossibility of retrospective diagnosis for such cases, see Graumann (2008) on the assumed case of gastroschisis in Obsequens, *Book of Prodigies* 40; and Graumann (2013) for intersex and retrospective diagnosis.

²⁰ Grmek and Gourevitch (1998: 503–508). ²¹ Dettwyler (1991); Scott (2000); Tilley (2015).

cases very few parents are still willing to reject their children once the handicap becomes apparent. By that time, the emotional attachment has become too great. Exceptions are known, but most concern situations of deep crisis which, in some cases, led to live burial or sacrifice. However, such cases did not afflict the disabled exclusively.²² Furthermore, ancient care providers did everything that they could to save lives when possible. Aristotle tells of newborns who appeared to be 'bloodless and dead' being brought back to life through the care of midwives. Might they have been cases of brain damage or stroke immediately after birth?²³

It is obviously impossible to look into the hearts of Roman parents who were confronted with a visibly abnormal or weak baby. We can, however, conceive of good reasons why they might nevertheless have decided to give the child a chance to live.²⁴ Perhaps they had waited a long time to have a child or perhaps they believed that the baby might be their only heir. Given the already low likelihood of survival for newborns, why would they not have given the child a chance? Perhaps they believed that the situation would eventually improve on its own. In a world without highly developed medical diagnostics (babies were neither weighed nor measured), the awareness of 'normality' and the medical patterns of expectation were likely to have been vague. Concrete estimates and decisions probably differed according to the social class of those involved. Perhaps poorer people realised that they were unable to garner the resources needed in order to support a baby in need of special care. Alternatively, perhaps the sense of shame was greater for members of the highest classes. Finally, the sex of the baby might have played a role. Aristotle notes in passing that more men than women suffered from deformities. The pragmatic scientist of today might remark that Aristotle had no statistics with which to support his claim. Nevertheless, he might have based it on impressions from his daily life. Did this mean that parents were more ashamed of handicapped daughters, and that they were therefore more likely to keep them inside the home? Alternatively, does Aristotle's comment suggest that boys were more likely to survive than girls?²⁵

²² Krause (1998: 323). *Pädizid* (the elimination of older children) is much less common than *Infantizid*. Crisis situations: Kellenberger (2011b: 76–77). Livy 22.57 on being buried alive, as commented by Engels (2007: 443–448).

²³ Aristotle, *Historia Animalium* 587a.

²⁴ This experiment of thought was developed by Patterson (1985).

²⁵ Aristotle, *On the Generation of Animals* 775a. See Laes (2008b: 98).

Physicians and Parents in Search of Explanations

One might wonder whether parents and/or scientists looked for explanations when confronted with the birth of an abnormal baby. Although they obviously must have done so, even the most learned scholars had yet to develop any systematic aetiology of congenital abnormalities. Nevertheless, the peripheral remarks of ancient authors do reveal a certain systematic character in their thinking with regard to congenital handicaps.²⁶

First, there are strict physiological explanations. According to Galen, deformities could emerge if the foetus had not had sufficient room in the uterus. The theory of bodily fluids was used to explain paralysis. If a part of the body was too cold, paralysis could set in. Heredity was known to some extent, in the context of blind people, as well as amongst those who were crippled or otherwise physically deformed. Another explanatory factor was weaker sperm originating from the weaker parts of the father's body.²⁷

Numerology played a role as well. Children born at eight months of gestation were usually regarded as non-viable and even potentially dangerous to the life of the mother. Children born at seven months of gestation did not run such risks. Modern readers will note the risk of circular reasoning. If things did not go well or if a sickly child was born, it was 'obviously' an eight-month baby. Remarkably, another numerical factor was hardly ever addressed by ancient physicians: the risk to mother and child if the mother gave birth too young.²⁸

The psychology and imagination of the mother also had an impact on the health of the baby. This has to do with the connections that ancient physicians understandably drew between visual stimuli and mental stimuli (images of ugliness or beauty were imprinted in the mind), and subsequently related to physical stimuli (the mental images of ugliness or beauty were literally converted into the material that was developing in the womb).²⁹ According to Soranus, some mothers bore babies resembling monkeys because they had looked at monkeys while they were having

²⁶ Bien (1997); Hummel (1999); Metzler (2006: 71–98); Laes (2013b: 127–129).

²⁷ Galen, *On the Causes of Disease* 7 (7.26–27 Kühn) (insufficient space in the uterus); Isidore of Seville, *Etymologies* 7.4.25 (bodily fluids and paralysis). On heredity: Aristotle, *Historia Animalium* 585b–586a; Pliny the Elder, *Natural History* 7.50; Hippocrates, *On the Sacred Disease* 2 (6.364–366 Littré). The same line of thinking can be found in the rabbinical sources: according to B. Hul 69a, blind parents conceive blind children, and lame parents conceive lame children, at least in animals. Weak sperm: Hippocrates, *On Generation* 9–13 (7.482–493 Littré).

²⁸ On the eight-month-old child, see e.g. Pliny the Elder, *Natural History* 7.4. See Hanson (1987). On weak infants of underage mothers: Oribasius, *Liber incertus* 21.3 (76–77 ed. Raeder; CMG vi.2.2).

²⁹ Reeve (1989). I am grateful to Toon Van Houdt for this suggestion.

sex. For this reason, the tyrant of Cyprus had ordered his spouse to look at beautiful statues while they made love. In this way, he was assuring himself of beautiful offspring. The importance of decorum during intercourse and the negative consequences that would emerge if such decorum was not observed are expressed eloquently in a passage from the Talmud:

Rabbi Yochanan ben Dahavai said: 'The Ministering Angels told me four things. People are born lame because their parents overturned their table when having intercourse (i.e. penetration from behind). They are born mute because the parents kissed "the place"; deaf, because the parents conversed during intercourse; blind, because they looked at "that place" ...' And I asked him: 'What is the reason for choosing midnight for having sex?' And he replied: 'So that I might not look at another woman, lest my children be bastards.' (B. Nedarim 20a-b)

The fact that such theories were expressed by ancient physicians and philosophers might seem strange to us. As late as 1876, however, a physician from Göttingen cautioned his pregnant patients against the gaze of crippled or deformed people. In the twentieth century, pregnant women were advised against looking at freaks at carnivals. Ancient doctors held that drunkenness during sexual relations posed a risk to the child: alcohol strengthened the fantasies in the mind, and the imagination was capable of causing deformed children.³⁰

The latter explanatory theories shift the blame for a handicap in the baby to the parents. Particularly in late antiquity, this model was formulated multiple times. If parents did not abide by the proper rules during intercourse, they would be responsible for any misfortune that might affect their offspring. Sex during menstruation, pregnancy or lactation was regarded as particularly reprehensible. This is not surprising if we consider that the likelihood of becoming pregnant is particularly low at such times.³¹ According to some Church Fathers, a handicapped baby was the consequence of sex on Sundays or Feasts and Holy Days.³²

It is difficult to determine the extent to which these explanations were echoed throughout the various layers of the population. In a touching case

³⁰ Soranus, *Gynaecology* 1.39, 1 (story about the monkey and the Cypriot tyrant); 1.39.2 (drunkenness). Accounts of becoming pregnant by looking at images have been collected by Maire (2004). See also Galen, *De theriaca ad Pisonem* 11 (14.254 Kühn); Caelius Aurelianus, *Gynaecology* 1.50. For the Jewish example, see Abrams (1998: 116–117).

³¹ Metzler (2006: 86–89). See Jerome, *On Ezekiel* 6:18 (pl 25.173); Rufinus, *Recognitiones* 9.9 (sexual relations during menstruation, pregnancy or lactation). Sophronius, *Marvels* 15.3 mentions elephantiasis as punishment for engaging in sexual relations during menstruation. See Gascou (2005: 267).

³² Gregory of Tours, *Life of Martin* 2.24; Caesarius of Arles, *Sermones* 44.7.

story from the French city of Bourges, we read about a mother who was taunted and ridiculed because she has brought a ‘monster’ (*monstrum*) into the world. In tears, she admitted that the child had been conceived on a Sunday night. Not a word was said about the father. Most probably, there was a legitimate father; if the case had involved an illicit relationship, the mother’s ‘guilt’ would have been even greater, and that would surely have been reported. The physiological explanations mentioned above also place the ‘blame’ for a congenital abnormality on to the mother, and some ancient authors report that men were accustomed to shifting the blame for anything that went wrong on to their spouses.³³

Things could go awry immediately after birth as well. Club feet were attributed to careless swaddling. The bones of infants were as soft as wax; the slightest improper treatment could lead to permanent deformity. Allowing babies to stand on their own feet too soon also posed a danger of abnormal growth. Even a water head was explained as the result of improper massage by the midwife.³⁴ Explanations for physical handicaps were sought in deficient hygiene or in the poor quality of the milk or of the first feeding.³⁵ Such theories made it easy to shift the blame onto midwives or wet nurses, who were already outsiders in a class society, in which belonging to a particular class made a world of difference.

Biological Birth and Social Birth: A Crucial Interval?

The elimination of a disabled baby might have been made easier by a custom that was known to have existed in both the Greek and the Roman worlds. Between the biological and the social birth of a child was an interval of several days. The term ‘social birth’ usually refers to the naming of the child. Before the ceremony, the baby was still an indefinable entity. It was not until the child was called by a name that it ‘truly’ existed for the community. Although the exact day of the naming could vary, it was

³³ On the infant of Bourges: Gregory of Tours, *Life of Martin* 2.24 and Laes (2011b: 44–45). According to John Chrysostom, *Sermons on Anna* 1.5 (PG 54.639), the woman could also be blamed for sterility. Aëtius, *Opinions of the Philosophers* 16.26 states that loving relations are the most fertile.

³⁴ Galen, *In Hippocratis De articulis librum commentarius* 4.4 (18.1.670–671 Kühn) on club feet; *On the Causes of Disease* 7 (7.27 Kühn) on standing too soon. Leonides in Aëtius 6.1; Oribasius, *Medical Collections* 46.28.1 (238–239 ed. Raeder; CMG vi.2.1); Paul of Aegina, *Epitomes iatrikes* 6.3.1 on hydrocephaly.

³⁵ Hummel (1999: 112–129) on milk and initial feedings. See Galen, *On the Properties of Foodstuffs* 3.15 (6.686 Kühn); Aëtius 4.7 for concrete cases of pathological consequences of poor milk for infants.

usually associated with such symbolic numbers as five, seven or ten. Anthropologists see an explanation in the natural shedding of the naval cord, which takes place between five and fifteen days after birth.

The Greek dossier on such social birth is strongly focused on 'classic' Athenian texts from the fifth and fourth centuries BC. In this case as well, however, commentaries on these passages were written far into the Roman era. The feast of the *Amphidromia*, or ritual 'run-around', was described as follows by a commentator on Plato:

For babies, this is the fifth day after birth. It is called such, because on this day, those who participated in the delivery ritually cleanse their hands. They also carry the infant around the hearth while walking in a circle, and they give him a name. Friends, housemates and relatives generally send gifts for the child, often cephalopods. (Scholia on Plato, *Theaetetus* 160e)

According to Aristotle, children receive their names when they are seven days old, because most will die before that time. The feast of the tenth day, the *Dekatè*, is also associated with gift-giving, sacrifice and naming.³⁶

Only one passage explicitly mentions the elimination of newborns before the naming day as a realistic option. In evaluating the philosophical argument of his conversational partner Theaetetus, Socrates uses the following comparison, which he most likely derived from the fact that his mother was a midwife:

That is apparently the being that we brought into the world with so much difficulty, whatever it might be. After the delivery, we must now hold the *amphidromia*. We must walk around our proposition, in order to determine whether the infant, without our knowledge, should not have been born, and is not worth raising, consisting only of wind and deception. Or are you of the opinion that your child should at least be fed and that it should not be abandoned? Or could you bear to see it subjected to criticism, and would it not incite you to flaming anger if we were to secretly do away with it: it is, after all, your first time in childbed? (Plato, *Theaetetus* 160e–161a)

It is difficult to take this comparison entirely seriously. If, before the *amphidromia* and the naming day, birth announcements had been made, friends had sent presents and preparations for the feast had been made, would it not be highly unusual to decide on the great day that the child is not to be raised? Most likely, Plato is referring to a custom from bygone times, in which the run-about was connected with the examination of the

³⁶ Aristotle, *Historia Animalium* 588a8–10 (seventh day); Demosthenes, *Orations* 39.20 and 22 (= *Against the Boeotians* 1.20 and 22) and *Orations* 40.28 and 59 (= *Against the Boeotians* 2.28 and 59) on the *Dekatè*. For the complete file, see Hamilton (1984); Golden (1986) and Laes (2014a).

baby. Once again, the ancient sources leave us in the dark about many questions. It is quite likely that no announcement would be made and no feast planned if the baby's initial state of health appeared to be precarious.

In the Roman tradition, the day of cleansing or naming day was known as the *dies lustricus*. Most sources situate this day on the ninth day of life for boys and the eighth for girls.³⁷ Plutarch was amazed at this difference of a day. His attempts to explain it include the claim that men are more perfect than women and that they therefore need an additional day to come to fruition.³⁸

The Roman goddess Nundina was named for the ninth day after birth, which is known as the *dies lustricus*. This is the day on which babies were ritually cleansed and received their names. This took place on the ninth day for boys and on the eighth day for girls. (Macrobius, *Saturnalia* 1.16.36)

There are sufficient testimonies concerning the *dies lustricus* to allow the conclusion that the custom was widespread throughout the western part of the Roman Empire down to late antiquity. An epitaph mentions a baby, 'a boy who had just been born and received his name'.³⁹ From Malaga, in the Spanish province of Baetica, we know of a law specifying that citizens with the most children should receive preference with regard to eligibility for serving in public office. The count could include deceased children as well, as long as they had died after their naming day.⁴⁰ Romans were required to have their children entered into birth registers. They were expected to do this no later than the thirtieth day after the naming.⁴¹ From the New Testament, we know that the first Christians were also familiar with a similar tradition. It was not until the eighth day that Elizabeth gave the name of John to her child, as the angel had told her to do. Zacharias, whose unbelief had caused him to lose his ability to speak, gave his consent through confirmation on a writing tablet. At that moment, he regained his speech. Jesus had also received his name from the angel, but his naming, circumcision and presentation in the temple took place on the eighth day after his birth.⁴² For the Church Father Tertullian, the naming day (*nominalia*) occupied the same

³⁷ The *dies lustricus* has been studied extensively. See Brind'Amour and Brind'Amour (1971) and (1975); Binder (1976: 116–117); Köves-Zulauf (1990); Garnsey (1991: 51–54); Hänninen (2005); Dasen (2009b: 207–208); Laes (2011a: 66–67).

³⁸ Plutarch, *Roman Questions* 288c–e3. ³⁹ *CIL* vi.20427. See Laes (2014b: 134; 139).

⁴⁰ *CIL* ii.1964; *AE* 2001.61.

⁴¹ *Scriptores Historiae Augustae, Marcus Aurelius* 9.7–9. The custom is often documented in the papyri. The thirtieth day after birth might also have applied as a boundary. See Schulz (1942) and (1943); Geraci (2001: 687).

⁴² Luke 1.13 (naming by an angel) and 1.58–65 (Elizabeth, Zacharias and the naming); Luke 1.18–25 and 2.21 (Jesus' name given by an angel) and 2.21–40 (naming, circumcision and presentation in the temple).

status as other important steps in life, including the assumption of the toga of manhood, engagement and marriage.⁴³ This does not mean, however, that the Romans did not observe or celebrate birthdays. Aulus Gellius writes about a student of the philosopher Favorinus, who had become a father. Immediately after the birth, the sage and several friends decided to visit the new mother and congratulate the father. Upon entering the house, however, they noticed that the mother was sleeping after the exhausting delivery. Only their friend spoke to them. From Pompeii, we are aware of several examples of graffiti announcing the birth of a child.⁴⁴ For the Jewish author Flavius Josephus, the birth celebrations of his people must have stood in sharp contrast to the exuberant revelry that was characteristic of the Graeco-Roman culture.⁴⁵ The *dies lustricus* does not seem to have played a role in any of these celebrations. When the Romans celebrated their birthdays, they were commemorating the day of their actual birth.⁴⁶

Once again, however, none of the sources gives any explicit indication that it made any psychological or emotional difference if an infant died before or after the naming day. We obviously cannot simply equate the existence of such a ceremony of social birth with the granting of an interval within which realistic options included elimination. Jews and Christians were also familiar with the custom of social birth (in the form of naming day, circumcision or baptism). For these cultures, we can at least establish that they were supposed to raise all of their children and that abandonment and infanticide were not tolerated.⁴⁷ According to the Talmud, a mother who strangled her newborn was a *shotah*, a person not in her right mind. In this case as well, however, rabbinical provisions suggest that Jewish infants were indeed left behind in marketplaces.⁴⁸

In the year 329, however, the emperor Constantine created a rule implying that, in some cases, the first days after birth were regarded as an important boundary period.

According to the regulations of our ancestors. If someone legally purchases a newborn child (*a sanguine*) or decides to raise it, he is authorised to own it as a slave. If, after several years, someone claims the freedom of this child or claims to be its master, he must provide another child or pay fair

⁴³ Tertullian, *On Idolatry* 16.1–2.

⁴⁴ Gellius 12.1.1–4; *CIL* iv.294 and 8149 (birth announcements).

⁴⁵ Flavius Josephus, *Against Apion* 2.26.

⁴⁶ Argetsinger (1992) on Roman birthdays. Schmidt (1910) remains the most thorough overview of Greek birthdays.

⁴⁷ Harris (1994: 7); Schwartz (2004).

⁴⁸ B. Ketubot 60b (*shotah*); PT Kid 4.2 (abandonment). See Abrams (1998: 121–122).

compensation in exchange. Anyone who has paid an appropriate price must be assured of his rights of ownership, such that he is free to use the slave as collateral for his own debts. Anyone resisting this law shall expose themselves to penalty. (*Codex of Theodosius* 5.10.1)

The relatively plastic terms *sanguinolentus* or *a sanguine* (literally, 'blood-scented', 'bloody') refer to the days immediately following birth.⁴⁹ It is important to note that this legal text refers exclusively to the rights to property of slaves. Anyone who had spared no cost or effort to raise a foundling infant as a slave could not simply lose his property sometime later because an owner or parent claimed that the child actually belonged to him. The text nevertheless found its way into the late antique and early medieval legislation of the 'Barbarian' kingdoms that immediately followed the Roman Empire. A similar decree applied to Romans living in Francia. The Franco-Salic legislation equated a child *in utero* with a newborn that had not yet reached its naming day. The laws of the Alamanni explicitly mention the interval of nine nights (or eight days). *Sanguinolenti* are mentioned in decrees from Angers (seventh century) and Tours (eighth century), in reports of abandoned children found close to a church.⁵⁰ Admittedly, the laws contain no explicit statement that an infant could simply be killed. Nevertheless, the equivalence to a foetus and the lack of a social identity at least opened the possibility of silent removal or elimination.

In reports from fifteenth-century Tuscany, we read about parents who left the house for a few hours after the birth of a baby that was undesired for some reason. Nature did its work. After several hours, the baby would die, without requiring any drastic intervention. 'Not only those who would suffocate an infant kill the child, but those who would throw it away, deny it food or leave it in a public place in order to incite sympathy – sympathy that they themselves do not have,' according to the Roman lawyer Paul.⁵¹ This is one of the rare passages explicitly addressing an issue about which most people would prefer to remain silent. Difficult decisions were often the result of discreet consultation between mothers and midwives. Doctors and fathers were seldom involved. Medical arguments like

⁴⁹ Harper (2011: 404–409) draws an explicit connection to the *dies lustricus*.

⁵⁰ *Lex Romana Raetica Curiensis* 5.8 (MGH Legum Tomus v, p. 357); *Pact. Legis Salicae* 41.20 (MGH Legum Sectio i. *Legum nationum Germanicarum* Tomus iv. Pars i, p. 161); *Pact. Alamannorum* 2.31 (MGH Legum Tomus iii, p. 35); *Formulae Andecavenses* 49 (MGH Legum Sectio v. *Formulae Merovingici et Karolinii aevi*, p. 21); *Form. Turonenses* 11. *Epistola collectionis* 1 (MGH Legum Sectio v. *Formulae Merovingici et Karolinii aevi*, p. 141). See Laes (2014).

⁵¹ *Digest* 25.3.4. On the cases in Tuscany, see Boswell (1988: 403).

those concerning the eight-month child likely offered as much or as little emotional solace as does current diagnostic thought (for which we should always recall that refined prenatal diagnoses and similar advances have staggeringly increased the emotional-ethical demands on the parents).⁵² The fact that the child had not yet been fully born 'socially' and that it thus did not yet have a name could have offered at least some relief.

It would be impossible to calculate figures on the number of children failing to survive the first days due to the more or less active intervention of the parents. This nevertheless suggests that, relative to current Western standards, the numbers were most likely enormous. For children with congenital abnormalities, the situation was even worse. In some cases, not only was survival completely out of the question for medical-technical reasons. Within a regime in which selection and elimination were common practice, decisions in cases involving defects were likely to have been made even more quickly. According to Ambrose, an eagle will reject an abnormal fledgling, not because she is a callous mother, but because she possesses wise judgement. Even if the Church Father continues his story with the adoption of the eaglet by a moorhen – a variant of the motif of the 'ugly duckling' – his remark in passing nevertheless leaves open the worst-case scenario for weak offspring. As late as the sixth century, the bishop Ennodius of Pavia resorted to a similar argument.⁵³

Given that emotional reactions can differ so widely that they cannot be gathered under a single heading, the choice to deny babies with abnormalities the chance to survive was not automatic. We are aware of sufficient examples of 'survivors', and we will encounter many more throughout this book. In other words, to state it wryly: without these survivors, a large portion of this book could not have been written.

⁵² Kellenberger (2011b: 160–162).

⁵³ Ambrose, *Hexameron* 18.60 (PL 14, 231), as commented by Boswell (1988: 168) and Laes (2008b: 95). Ennodius, *Epistles* 1.18.4 (eagles do not wish to see any of their young die, but they refuse to recognise those that do not succeed in the test of exposure to bright sunlight).

Mental and Intellectual Disabilities *Sane or Insane?*

The Madness of Emperor Caligula

In his sixth satire, Juvenal (ca. 58–138) lashes out uncommonly strongly against the depraved and deceptive female race. Magic, occult sorcery and love potions are amongst the sharpest weapons of the so-called weaker sex. In this context the satirical poet recalls the times of ‘Nero’s uncle’. In doing so, he is making a direct reference to the Emperor Caligula (37–41), who was generally known as ‘a madman’ (*furere*). He blames the Empress Caesonia: she was believed to have rubbed his forehead with the remains of a baby chick that could not yet stand on its own legs. During Caligula’s reign, the entire world was in chaos. It was as if Juno had made her husband mad.¹

In the time of Juvenal, Caligula’s insanity must have been legendary. Surely, this madness was not only the subject of satire several decades after the emperor’s death. Even at the court of Emperor Nero, Seneca was convinced that life in the palace during the time of Caligula must have been hell. Seneca also refers to the ‘rampages’ (*dementia*) of the young emperor, without going into further clinical detail.² Later, Tacitus refers to the young emperor’s impulsive spirit and exaggerated boldness – such terms obviously do not equate to insanity.³

Those who would read Suetonius’ biography of Caligula from a clinical psychiatric perspective are sure to find more than enough material to make a devastating diagnosis of the emperor. Suetonius pulled no punches: this emperor was ‘a monster’ (*monstrum*).⁴ Psychiatrists would have immediately labelled him a sadist. When viewing executions, he was fond of ‘numerous slight wounds’. The victims had to feel themselves dying. Interrogations on

¹ Juvenal, *Satires* 6.614–620.

² Seneca, *De beneficiis* 7.11.2 (*dementia*); *De brevitate vitae* 18.5–6 (reign of terror); *De consolatione ad Helviam* 10.4 (Caligula was conceived by nature in order to demonstrate how vice can be paired with success); *De tranquillitate animi* 14.5.

³ Tacitus, *Agricola* 13.2; *Annals* 6.20.1; 6.45.5. ⁴ Suetonius, *Caligula* 22.

the rack were conducted during his drinking or eating orgies. He had the popular actor Apelles scourged to death, while he enjoyed his 'melodious lamentations'. His cruelty was manifested in psychological ways as well. 'He even used to threaten now and then that he would resort to torture if necessary, to find out from his dear Caesonia why he loved her so passionately.'⁵ His sexual debauchery flouted all standards of his time. He had an incestuous affair with his three sisters, and he had deflowered his eldest sister Drusilla even before he had taken on the toga of maturity. He was unable to leave any woman in his surroundings alone, and he simultaneously engaged in sexual relations with free adult men. These partners included the pantomime actor Mnester, as well as the young Valerius Catullus, who was from a family that had produced consuls.

He was not averse to taking the passive role in such relationships. Valerius announced to everyone 'that he had violated the emperor and worn himself out in commerce with him'.⁶ In his attire, he disregarded all sense of decorum. He liked to dress as a woman, and he was even spotted as Venus once.⁷ He also suffered from unbridled wastefulness, exhausting the inheritance of Tiberius, twenty-seven million pieces of gold, in a single year.⁸ He was also no stranger to sudden manias and delusions. He once considered appointing his horse as consul. Bridges, dams and dikes were constructed under the most difficult of circumstances, at the cost of untold effort. His military campaign to Britannia ended in a conquest – of seashells on the beach, which the soldiers were subsequently ordered to drag along in a victory march all the way to Rome.⁹

Attacks of anxiety and panic were the other side of the coin. The emperor was terrified of lightning. When there were thunderstorms at night, he would hide his face in his clothing or even crawl under his bed. During a visit to Sicily, the rumbling from Mount Etna caused him to flee in the middle of the night. He suffered from nightmares, strange visions and insomnia. He also could not swim. His broad forehead and the baldness on the back of his head were also responsible for certain complexes. No one was ever allowed to view him from a higher position, and it was absolutely forbidden to utter the word 'goat' in his presence.¹⁰

⁵ Suetonius, *Caligula* 30–33 (trans. J. C. Rolfe).

⁶ Suetonius, *Caligula* 24 (sisters); 36 (men) (trans. J. C. Rolfe). ⁷ Suetonius, *Caligula* 52.

⁸ Suetonius, *Caligula* 37.

⁹ Suetonius, *Caligula* 46–49 (Britain); 55 (the horse Incitatus); 19 (bridge between the Gulf of Baea and Pozzuoli) and 37 (dikes and dams).

¹⁰ Suetonius, *Caligula* 50–51 (fears); 54 (swimming); 50 (appearance).

With these – and many other – available anecdotes about Caligula, it would be no trouble to play the cinema audience or to write a bestseller/sensational article. However, the approaches that historical science takes to the biographies of ancient emperors have since progressed beyond merely summing up salient or remarkable facts. For example, Suetonius' presentation of 'bad' emperors exhibits a relatively consistent strategy. He was particularly hard on rulers who maintained a poor relationship with the senate and wished to replace ancient Roman values with Graeco-Hellenistic customs. Their badness was reflected primarily in their lack of control. A ruler who could not keep himself under control would inevitably become a monster to his subjects as well. Such depravity could be manifested in many different ways; sexual debauchery, greed and wastefulness were the most frequently mentioned symptoms. Physiognomic allegations also constitute a structural component of the pattern. The moral depravity of a ruler was reflected in his ugly or even repulsive appearance. Suetonius also paid considerable attention to the 'degenerative' concept: Caligula was an example of how situations became progressively worse with the rulers of the Julio-Claudian dynasty.¹¹ In some respects, the allegations against Caligula are relatively stereotypical. A similar portrait could be made of Nero, Domitian, Heliogabalus or other emperors.¹² Medical approaches searching for the causes of Caligula's insanity are thus also hopelessly out of date. Mental confusion due to epileptic seizures, alcoholism, bacterial meningitis, manic depression, premature dementia – the list can go on and on, without ever yielding a conclusive diagnosis.¹³ Some modern biographers have since attempted to rehabilitate Caligula, while others continue to believe in the possibility of an intellectual affliction.¹⁴

Nevertheless, for many reasons, Caligula's insanity remains interesting to those seeking to write on the history of disability. One reason is that, in his biography, Suetonius provides a glimpse of a typical ancient interpretation of personality development. As a young boy, Gaius had been the

¹¹ Gladhill (2012). Cf. above p. 11. Hekster (2009) is a highly accessible work on sane and insane emperors and their public images.

¹² From the seemingly voluminous literature on this topic, I mention only Wallace-Hadrill (1983); Gascou (1984) and Dupont and Eloi (2001).

¹³ See Sandison (1958); Morgan (1972–73); Benediktson (1989) and (1991–1992) – the list is in no way intended to be exhaustive. Recent biographies on Caligula include Winterling (2003) and Wilkinson (2005).

¹⁴ Balsdon (1934) is of a more rehabilitative character; Barrett (1989) is highly critical of the ancient tradition of insanity; Ferrill (1991) does subscribe to insanity theory. Wilcox (2008) is a particularly meaningful interpretation of the ancient theory of monsters.

darling of the soldiers in the camp of his father Germanicus – hence his nickname Caligula ('Little Army Boot'). Caligula was only seven years old when his father died. He spent the rest of his childhood with his mother Agrippina and, after she was exiled, with his great-grandmother Livia (whose eulogy he would deliver as a child) and, finally, with his grandmother Antonia.¹⁵ The period around his eighteenth year – when he had just taken on the toga of manhood – was particularly precarious. He was living in the court of the tyrannical Emperor Tiberius on the island of Capri. His two brothers had since been declared enemies of the state and killed by the emperor. He managed to survive by allowing all the insults to roll over him with masterful indifference. Moreover, he had put the calamities committed against his family so thoroughly out of his mind that it seemed as if they had never occurred.¹⁶ Viewed from a modern psychological perspective, the case seems clear. We are dealing with a heavily traumatised young man, who is sublimating his lack of a safe home in his childhood and the devastating uncertainty of his existence by forgetting and pretending. The ancients, however, viewed matters in an entirely different way. Caligula was a monster, pure and simple, because he had always been that way. Even on Capri, he had been unable to conceal his cruel nature. He had witnessed executions with sadistic pleasure. Prostitutes and bars had already become his favourite pastimes. The former Emperor Tiberius knew what was going on, having stated that he was 'rearing a viper for the Roman people and a Phaethon for the world'.¹⁷

In the modern controversy between proponents of the theories of *nomos* and *physis* – with the former arguing that the majority of our behaviour can be changed and is learned through culture and society, while the latter theory claims a large share of pre-programming – the ancient biographers are resolute in advancing the *physis*. Even in the youngest child, the latent characteristics of cruelty or goodness could be observed. For example, Caligula's second daughter Julia Drusilla (he had lost his first child, along with his first wife, in childbirth) was necessarily a little monster. As the child of a bad father and a mother who was 'a woman of reckless extravagance and wantonness' (incidentally, Caesonia was Caligula's fourth wife), it could not have been otherwise: 'she would try to scratch the faces and eyes of the little children who played with her'. The child never had the opportunity to prove the opposite. On the day that her mother and father

¹⁵ Suetonius, *Caligula* 9–10.

¹⁶ Suetonius, *Caligula* 10. On the death of Caligula's brothers: Suetonius, *Tiberius* 54.

¹⁷ Suetonius, *Caligula* 11 (trans. J. C. Rolfe).

were assassinated, the little girl, who was barely two or three years old, was dashed against a wall.¹⁸ Such ancient acknowledgements of natural predisposition need not imply any paedagogic pessimism or indifference.¹⁹

It is no reason to withhold care from certain children. On the contrary, they should be raised under the best possible circumstances. If their nature is able to realise any benefit from our dedication, they might all develop into wonderful men. If such is not the case, we would be free of blame. (Galen, *De propriorum animi cuiuslibet affectuum dignotione et curatione* 7.15; 5.39–40 Kühn) (see Godderis [2008: 111])

Caligula's file is interesting for another reason as well. The ancient authors combined the notion of natural disposition with the acknowledgement of a trigger that would eventually launch the emperor definitively into insanity. Ancient sources claim that the emperor suffered from a type of mental confusion. In their view, Caligula was also aware of this himself. Even as a child, he had suffered from epileptic seizures (*comitalis morbus*). As an adult, he was able to manage relatively well, although he had difficulty keeping himself together or controlling himself during his low periods. More than once, he had thought of isolating himself in order to allow the illness to heal. His wife Caesonia, however, would ultimately cast the final blow to his mental health, having given him a love potion that rendered him completely mad. Moreover, Suetonius explicitly attributes the emperor's contradictory characteristics of overconfidence and fear to 'mental weakness' (*valetudini mentis*).²⁰ Flavius Josephus also believed that a love potion prepared for him by Caesonia had driven the emperor to mania. He added that the first two years of his reign had proceeded well, but that Caligula had crossed the boundaries thereafter, having begun regarding himself as a god.²¹ Another Jewish author, Philo of Alexandria, had met Caligula personally, as a member of a delegation defending Jewish interests in Alexandria. Although Philo did not have a high opinion of Caligula, nowhere did he explicitly mention insanity. In the seventh month of his reign, however, the emperor suddenly fell ill. This was in the autumn of the year 37. His new lifestyle of luxury and debauchery in the imperial court had likely contributed to this illness. From that time on, Caligula was an arrogant, selfish and reckless despot – character traits that he had anxiously concealed before that time.²²

¹⁸ Suetonius, *Caligula* 25 (daughter); 59 (murder) (trans. J. C. Rolfe).

¹⁹ On ancient personality development, see Pelling (1990); Most (2008); Laes (2011a: 99).

²⁰ Suetonius, *Caligula* 50–51 (trans. J. C. Rolfe).

²¹ Flavius Josephus, *Jewish Antiquities* 19.193 and 18.256.

²² Philo, *Legatio ad Gaium* 14–22.

However speculative the reports of Caligula's insanity might have been, the emperor more than deserves his place at the opening of this chapter on mental and intellectual disabilities. The texts clearly demonstrate that the ancient authors noticed that there was 'something unusual' about the emperor, and that it was related to his intellectual condition. At the same time, the vagueness of the description is symptomatic of antiquity, as it is of our modern conceptions of mental problems. When confronted with information about a person from the past who was missing a leg, who was blind or who could barely make himself understood, we can easily develop an image in our minds. With regard to the diagnosis and classification of mental disorders, however, psychiatrists and the pharmaceutical industry are waging an uphill battle even today.

One might thus wonder whether it is possible to say anything at all about mental problems in the distant past. I am of the opinion that it is possible. Even more than is the case for other disabilities, however, methodological clarification is needed at the outset.

Four Historical Approaches to 'Mental Disorders': A Way Out of the Impasse?

Psychology can be compared to a lovely wooden chest. A student plans to restore this piece of furniture with several fellow students. He takes a drawer home with him and spends his entire life cutting and sanding it. When he is finally satisfied with it, he wishes to return the drawer to its place. At that point, however, he discovers that the chest has since decayed.

This comparison did not come from a failed psychology student or a frustrated therapist, but from one of the most renowned researchers of the twentieth century. As a developmental psychologist at Harvard University, Jerome Kagan (born 1929) enjoys international fame. In the ranking of famous psychologists, his scores are higher than those of Carl Gustav Jung and Ivan Pavlov. Nevertheless, his recent book, *Psychology's Ghost: The Crisis in the Profession and the Way Back*, reflects deep disappointment in the way in which psychology is practised today. The over-diagnosis of such phenomena as ADHD and depression is subject to particular criticism by Kagan. The startling increase in the statistics (5.4 million young Americans with symptoms of ADHD; 1 out of every 40 young people in the United States treated with anti-depressants) means more money for the pharmaceutical industry, as well as for psychiatrists and researchers. Psychiatry is the only medical discipline to define diseases according to symptoms and scores on questionnaires. Because of such diagnostic techniques, they

appear to be continually discovering new disorders. Whereas 'bipolar disorder' (manic depression) was once rare, one million Americans younger than nineteen years of age are now purported to suffer from it. Popular websites sometimes claim that Kagan argues that autism, depression and ADHD 'do not exist'. Such claims are a gross distortion of his proposition. He does acknowledge the existence of genetic conditioning, chronic psychological conditions and disorders in the nervous system. His accusation concerns the exaggerated urge to make classifications and diagnoses, such that every child who is slightly dissocial is labelled as autistic, or such that every protracted period of despondency is labelled as depression.²³ A similar accusation against over-classification has been made by Allen Frances, 'the most powerful psychiatrist in America', according to the *New York Times*. As an expert, Frances was closely involved in the development of the *Diagnostic and Statistical Manual of Mental Disorders III* (DSM III). He was also the chair of the group responsible for the development of the DSM IV. As an insider, he describes the excesses in psychiatric diagnostics. In order to become sane and healthy again, the field of psychiatry must be conscious of its historical dimension. As was the case in the nineteenth century, when neurasthenia and hysteria were fashionable phenomena, our time has led to an explosive growth in the number of 'psychiatric abnormalities'. Many people are now convinced that they are 'sick' and in need of medication. They are incapable of 'normal' functioning in society. According to Francis, we must once again learn to live with uncertainty, and psychiatric diagnosis must not be an excuse for failing in other domains of life.²⁴

Conceptual confusion and the creation of categories under the influence of sociological pressure groups are not particularly inviting for clear historical research. The fourth edition of the DSM, the Bible of modern psychiatry, distinguishes at least sixteen groups of psychiatric disorders, with innumerable subgroups. According to such enumerations, around 48 per cent of the American population are likely to suffer from one of these disorders at some point in their lives.²⁵ It is important to note, however, that the DSM classification is highly determined by culture. For example, previous editions listed homosexuality in the series of mental disorders. It was not definitively removed from the lists until 1986. The sometimes turbulent preparation of the DSM IV can teach us a great deal

²³ Kagan (2012). ²⁴ Frances (2013).

²⁵ According to the World Happiness Report, mental problems are the most commonly occurring disability in the world. Cf. below p. 175–176.

about the controversies existing within contemporary psychiatry. Competing classification systems exist as well. The Research Domain Criteria (RDOC) of the US National Institutes of Mental Health aim for more integration of developments in research on brain scans and genetic research.²⁶

Proceeding from Graeco-Roman thought, Bennett Simon has recently pointed out the basic problems with classifications of mental disorders. The illusion of value-free methods of classification; the strong influence of cultural factors and value patterns; the quest for ever more subdivisions; the tension between the individual patient and the theory of categories; the difficulty of drawing distinctions between illnesses, disorders, character traits and temperament; the difficult relationship between classification and therapy; the almost magnetic attraction of fashionable terms and diagnoses – all of these phenomena resound in the ears of social workers, teachers and parents.²⁷

Rem tene, verba sequentur – know what you wish to talk about before you start talking. This ancient adage is eminently applicable to research on mental disorders from the past. Historians can choose amongst four approaches, with each option having a clear impact on the further treatment of the topic.²⁸

The medical model assumes that mental disabilities, like other disabilities, have biological-physiological causes, and that they must therefore be sought in the human brain. Just as people are able to search for material evidence of people with mobility problems in the past, it is possible to do so for people with mental disabilities as well. In some rare cases, it is even possible through osteology. For example, Down's syndrome, hydrocephaly and Klippel-Feil syndrome can be detected according to a skeleton.²⁹ Knowledge of biological-genetic regularities also provides historical information. For example, endogamy through widespread brother–sister marriages in Graeco-Roman Egypt contributed to a greater number of people with mental problems.³⁰

The psychological model also assumes transcultural givens, which are actually broader than their purely physiological interpretations. Adherents

²⁶ Rogler (1997); Toner (2009: 55–62); Harris (2013a: 2) and particularly Ronson (2011) are outstanding introductions to the history of the *DSM*. On the *DSM V*, published in May 2013, see www.dsm5.org (last viewed February 2013). For RDOC, see www.nimh.nih.gov.

²⁷ Simon (2013: 34–39). Both the article by Simon and the one by Hughes (2013) use antiquity to propose new perspectives in research on mental disorders and the approach to patients.

²⁸ My comments in this regard are based on Toner (2009: 57–62).

²⁹ Cf. above p. 17–18 for these examples. ³⁰ Cf. above p. 20.

to this intellectual framework argue that strong impulses and intellectually related factors will inevitably lead to particular psychological reactions. It is a distinctly 'if . . . then' model. In all periods of history, sexual abuse must surely have led to psychological trauma, and physical brutality during childrearing is sure to have had a damaging effect on all children in all cultures. The primarily American school of psycho-historians fits perfectly within this intellectual framework. For them, the history of their childhoods is a nightmare, a story of psychological damage and trauma from which we are today only slowly awakening.³¹

The anti-psychiatric model is diametrically opposed to the previous two ideologies. Primarily inspired by Michel Foucault, 'insanity' is interpreted as a social construction from this perspective. Psychiatry is an instrument of power structures. Labelling a person as 'a madman' means the exercise of power and the imposition of a pattern of thinking by a particular society. The *moriones* (madmen) amongst the Romans were in no way comparable to the patients populating our psychiatric clinics.

Taking a psychosocial approach, the social-stress model combines the best of the three previous models. Within this intellectual framework, physiological-biological and intellectual factors are not effaced. As with Kagan, this perspective does not deny the existence of people across time and culture with deeply despondent dispositions or feelings, hyperactive people or antisocial people. At the same time, this model acknowledges the crucial influence of society on such phenomena. This applies not only to the manner in which these phenomena are perceived – one society (possibly subject to the influence of interest groups or other preoccupations) is able to diagnose certain behaviour as problematic or pathological, while another society does not see it as a problem. The structures and the rhythm of one society can elicit certain psychological phenomena to a greater extent than is the case in another society. From this perspective, it could be that burn-out, depression, stress and similar phenomena are more strongly related to our Western society, which imposes a strict time structure on its population.

This chapter proceeds from the social-stress model. The exposition is guided by ancient intellectual frameworks and habits, and not modern psychiatric subdivisions or practices. Occasionally, however, and without digressing into naive or simplistic comparisons, we attempt to draw

³¹ Laes (2011a: 14 and 138) on psycho-history. See particularly deMause (1974). A psychiatry-oriented historical approach can also be found in Arseneault, Cannon, Fisher, Polanczyk, Moffit and Caspi (2011). Toner (2013) makes a powerful case for studying trauma in antiquity.

connections with phenomena that we encounter in our own time. Although the study of the ancient mentality and society remains the primary focus, the context of mental disorders also requires a certain element of transculturality.

The choice of this model immediately raises the question of how 'stressful' Roman society was for its inhabitants. This question cannot be answered with figures or statistics, even by approximation.

It is nevertheless worthwhile at least to pose questions concerning the mental health status of ancient Romans. In a bold book, Jerry Toner refers to the daily struggle for life, the uncertainty and the fragility of life, as well as to the randomness accompanying the treatment of the wealthy. Violence and brutality were rife, even in the context of parenting. Torture had an unmistakable impact. People were uncertain about their status or origins (processes concerning the presence or absence of slave status), and the commonly occurring practice of child abandonment was not without psychological consequences. In closed communities, social control could be oppressive. Quite recently, Toner has even addressed the topic of trauma, both amongst soldiers and war victims – a history that has thus far remained largely unwritten. Within the social-stress model, however, the existence of such traumas cannot be denied.³²

Roman Legal Thought: A 'Practical' File

In one respect, Roman legislation with regard to mental disabilities constitutes the easiest, least ambiguous file. Lawyers concentrated strongly on concrete situations, devising practical ad hoc solutions for specific problems that emerged.

Those reading through the extensive body of Roman law encounter an extremely rich vocabulary for intellectual disorders. The following list is ranked according to frequency: *furor/furiosus*, *demential/demens*, *mente captus*, *insanial/insanus*, *mentis alienatio*, *non suae mentis/non compos mentis*, *lunaticus*, *fanaticus*, *freneticus*, *melancholicus*, *fatuus* and *morio*.³³ As early as the nineteenth century, specialists in Roman law attempted to ascertain possible differences in meaning amongst the various terms. Their conclusion, however, was that such differences could not be derived from the

³² Toner (2009: 54–91) is an occasionally provocative chapter on mental health. See Toner (2013) on trauma, with rich bibliographic references on the study of trauma for other historical periods. On soldiers and psychological trauma, see Melchior (2011) and van Lommel (2013a).

³³ See Nardi (1983: 18–45); Gevaert (2000: 60); Toohey (2013: 443). Audibert (1892) already conducted the complete basic research.

texts. This is not necessarily surprising. Roman lawyers were not physicians interested in diagnoses. They were interested in the fact that a specific person in a specific situation had caused a disturbance in the normal social conduct of affairs because he was ‘out of his mind’. This directly implied that he could not be held responsible for his actions. One question that was of legal importance concerned whether the situation of non-responsibility was temporary or permanent. In this context, *furor* appears to refer to a temporary state of insanity alternating with periods of lucidity, while *dementia* refers to a permanent situation. This distinction is also made within the philosophical tradition.³⁴ The lawyer Paul tells of a *perpetuo furiosus*, someone who is permanently out of his mind.³⁵ Nevertheless, innumerable exceptions for the use of *furiosus* are to be found. It is thus also plausible to argue that lawyers used terms that were quite vague to refer to ‘intellectually ill persons’.³⁶

More important than the search for subtle distinctions, which were actually not made, is the process of identifying the legal consequences of ‘intellectual disturbances’. In this context, scholars have recently emphasised that the approach taken by Roman lawyers in such cases was extremely humane. ‘Madmen’ retained their dignity, citizenship and wealth, while receiving legal protection. We read nothing on the execution of criminals with intellectual deficiencies (in contrast to the American situation, as noted by some ancient historians from the United States).³⁷

Furiosi and people with related disorders held the same status as underage children (*infantes*, literally, ‘those who cannot speak’) and minors.³⁸ In some cases, a madman would be equated with ‘one who is absent’ or ‘one who is sleeping’. Both of these comparisons suggest the temporary character of the situation.³⁹ It is logical that a *furiosus* was not allowed to draw up a will, to marry, to hold political office, to assume custody or to

³⁴ Stok (1996: 2299) summarises the discussion. Kazantzidis (2013) provides an extensive treatment of Cicero’s vision on melancholy. Philosophical tradition: Cicero, *Tusculan Disputations* 3.10–11: *insania* refers to the loss of self-control, while *furor* refers to ‘true’ insanity.

³⁵ *Digest* 5.1.12.2 (Paul).

³⁶ Examples of passages in which the terms are used completely interchangeably and in which *furiosus* appears to be a permanent reference to insanity include *Digest* 1.18.13.1 and 1.18.14 (Ulpian); *Digest* 5.7.1 (Julian). Lebrige and Imbert (1967: 34–35) argue that no distinction between *furiosus* and other terms is actually made in the legal corpus.

³⁷ *Digest* 1.5.20 (Ulpian) (retention of dignity). On the humane approach, see Toohey (2013: 459–460) and Harris (2013a: 3 and 20, respectively).

³⁸ Children: *Digest* 41.4.2.5 (Paul); 48.8.12 (Ulpian); Gaius, *Institutes* 3.109. Minors: *Digest* 5.1.11.2. See Toohey (2013: 449 and 453–454).

³⁹ *Digest* 29.7.2.3 (Julian). See Toohey (2013: 450). See Toohey (2013: 452) on the non-permanent state of legal insanity.

serve as a judge.⁴⁰ This case also offers a remarkable parallel to rabbinical jurisprudence: madmen and *shoteh* were subject to identical restrictions. The same comparisons can be found in Byzantine and classical Arabic law.⁴¹

One remarkable case story about insanity breaking out during marriage reads as follows:

Where either a husband or a wife becomes insane [*furere*] during marriage, let us consider what should be done. And, in the first place it should be observed that there is no doubt whatever that the one who is attacked by insanity cannot send notice of repudiation to the other, for the reason that he or she is not in possession of their senses. It must, however, be considered whether the woman should be repudiated under such circumstances. If, indeed, the insanity has lucid intervals, or if the affliction is perpetual but still endurable by those associated with the woman, then the marriage ought by no means to be dissolved. And where the party who is aware of this fact, and of sound mind, gives notice of repudiation to the other who is insane, he will, as we have stated, be to blame for the dissolution of the marriage; for what is so benevolent as for the husband or the wife to share in the accidental misfortunes of the other? (*Digest* 24.3.22.7; Ulpian, trans. S. P. Scott)

The passage goes on to state that there are cases in which the situation is so serious as to endanger the safety of the healthy partner and those around them and in which the marriage is not expected to produce any children. In such cases the termination of the marriage can be justified.⁴²

Around 450 BC, the Twelve Tables provided for the management of the wealth of a mentally disabled person by relatives or family members. More than seven centuries later, the *Digest* tells of a father who had willed to one of his two daughters the usufruct from the inheritance of their mentally disabled brother (*mente captus*), thus ensuring that the boy would be fed and cared for and making arrangements for his expenditures. If the brother should die without ever being cured (the expectation that healing *was* possible is stated explicitly), the inheritance would remain in the hands of the sister Publia Clementiana, barring comprehensive evidence that the father's original intentions had been otherwise.⁴³

⁴⁰ *Digest* 5.2.2 (Marcianus) (will); *Digest* 5.1.12.2 (Paul) (judge); *Codex of Justinian* 5.70.1 (curator). See Gevaert (2000: 78).

⁴¹ One exemplary text is B. Yebamot 112b. See Abrams (1998: 176–178, 185–186, 188). For Byzantine law, see Trenchard-Smith (2010); for Arabic law, see Dols (1992), with reference to Roman law on pp. 428–430.

⁴² Toohey (2013: 457–458), who also refers to *Digest* 24.3.22.10 (Ulpian), which contains a report of familial insanity (both father and daughter).

⁴³ Twelve Tables 5.7; *Digest* 33.2.32.6 (Scaevola). See Toohey (2013: 454–455) on the curator.

In some cases, an official guardian or curator would be appointed for a mentally disabled person. Such functions were exclusively reserved for adult men.⁴⁴ In addition to vouching for the financial assets of the mentally disabled person, the curator was expected to ensure his physical well-being. A curator who did not perform his tasks properly could be removed from his position.⁴⁵

Curators were also appointed for spendthrifts (*prodigi*) who wasted their assets. For both groups, the guardian would remain in service until a responsible pattern of living and health had been regained. The Institutes of Justinian appear to make a distinction between *furiosi* (who could still be cured) and *mente capti*, whose conditions were expected to be permanent.⁴⁶

Supervision and control by family members could also imply confinement. As early as the fifth and fourth centuries BC, classical Greek authors from Athens noted that confinement, or at least control, of the mentally ill was a desirable solution, especially with regard to the well-being of the person who was ill.⁴⁷ As the *Digest* tells us, such measures were even taken in cases of parricide:

When anyone, while insane [*per furorem*], kills his parents, he shall go unpunished, as the Divine Brothers stated in a Rescript with reference to a man who, being insane, killed his mother;⁴⁸ for it is sufficient for him to be punished by his insanity alone, but he must be guarded with great care, or else be kept in chains. (*Digest* 48.9.9.2; Modestinus, trans. S. P. Scott)

Once again, we read that this measure focused primarily on the well-being and protection of the intellectually ill.⁴⁹ Most such cases involved house arrest and surveillance by relatives, as evidenced in a passage referring to an exceptional situation:

In the case of insane persons [*furiosi*] who cannot be controlled by their relatives, it is the duty of the Governor to apply a remedy, namely, that of confinement in prison . . . (*Digest* 1.18.3.1; Ulpian, trans. S. P. Scott)

Where the prison should be is unclear; special institutions for the insane did not yet exist.⁵⁰

⁴⁴ *Digest* 27.10 is dedicated entirely to the rights and obligations of the *curator furiosi*.

⁴⁵ *Digest* 27.10.7 (Julian); *Digest* 27.10.17 (Gaius). On eviction by the governor of a province or by the praetor in Rome, *Digest* 27.10.7.2 (Julian) and *Digest* 27.10.13 (Gaius).

⁴⁶ *Digest* 27.10.1 (Ulpian); *Institutes of Justinian* 1.23.3–4.

⁴⁷ Plato, *Laws* 934c–d (by relatives); Xenophon, *Memorabilia* 1.2.50; [Aristotle], *Athenaion Politeia* 56.6. See Stok (1996: 2300–2301).

⁴⁸ A reference to the provisions of Marcus Aurelius and Commodus (*Digest* 1.18.14); cf. below p. 50–51.

⁴⁹ *Digest* 1.18.14 (Macer). ⁵⁰ Toohey (2013: 456).

Unfortunately, many interesting aspects concerning daily life remain underexposed in these legal fragments. A number of texts mention the problem of *simulatio* (pretending). For example, we read that some people would feign insanity in order to escape the high cost of assuming public offices.⁵¹ The possibility of simulating a state of unsound mind is also mentioned in the case of parricide.⁵² The problem of feigned illness – not only ‘psychiatric’ afflictions – was also quite familiar to ancient physicians. Galen even wrote a separate tract on exposing ‘comedians’, that is those faking a disease.⁵³ How could it be clearly established whether someone was of sound mind? Most probably, a doctor was consulted, as we can read in the comedic description in Plautus’ *Twin Brothers*, in which one of the Menaechmus brothers is suspected by those around him of having lost his mind.⁵⁴ There was obviously no such thing as a legal physician and, for lack of more or less established diagnostic criteria, we can only guess at what finally led to the ultimate verdict. Exactly where mentally disturbed people were confined and who assumed responsibility for the routine tasks of supervision often remain unclear. The most concrete glimpse is offered in a text about a certain Aelius Priscus, who had killed his mother. This is the response of the Emperors Marcus Aurelius and Commodus to Scapula Tertullus:

If it is positively ascertained by you that Aelius Perseus is to such a degree insane that, through his constant alienation of mind, he is void of all understanding, and no suspicion exists that he was pretending insanity when he killed his mother, you can disregard the manner of his punishment, since he has already been sufficiently punished by his insanity; still, he should be placed under careful restraint, and, if you think proper, even be placed in chains; as this has reference not so much to his punishment as to his own protection and the safety of his neighbours. If, however, as often happens, he has intervals of sounder mind, you must diligently inquire whether he did not commit the crime during one of these periods, so that no indulgence should be given to his affliction; and, if you find that this is the case, notify Us, that We may determine whether he should be punished in proportion to the enormity of his offence, if he committed it at a time when he seemed to know what he was doing. But, when We are informed by your letter that his condition so far as place and treatment are concerned,

⁵¹ *Digest* 27, 10, 6 (Ulpian). ⁵² *Digest* 1, 18, 13, 1 (Ulpian).

⁵³ Galen, *Quomodo morbum simulantem sint deprehendendi* (Kühn 19.1–7). See Gourevitch (2009) for two case studies and references to further literature. Galen, *Quomodo morbum simulantem sint deprehendendi* (Kühn 19.2–3) explicitly mentions the feigning of intellectual afflictions.

⁵⁴ Plautus, *Menaechmi* 889–965. Stok (1996: 2289–2297) analyses the scene within the framework of mental afflictions.

is that he remains in the charge of his friends, or under guard in his own house; it appears to Us that you will act properly if you summon those who had care of him at that time, and investigate the cause of such great neglect, and decide the case of each one of them, so far as you discover anything tending to excuse or increase his negligence; for keepers are appointed for insane persons, not only to prevent them from injuring themselves, but that they may not be a source of destruction to others; and where this takes place, those very properly should be held responsible who are guilty of negligence in the discharge of their duties. (*Digest* 1.18.14; Macer, trans. S. P. Scott)

We must ultimately recall that these texts refer only to the relatively small portion of the population that appealed to Roman law. When little property was involved, it was of little use to appoint a curator. In the cases that have been described, a family context is assumed. But what of the ‘mentally disturbed people’ who were unable to rely upon the solidarity of their families? For serious cases, they probably lived on the streets as drifters, in the absence of hospitals and asylums, surviving on the goodwill or pity of those around them. The madman described in the fragment from Artemidorus was likely to have survived in such a situation. Philo of Alexandria tells of a certain Caraba, who wandered through the streets naked, day and night, regardless of the weather. Children and youths regarded him as a plaything. His insanity was thus mild and benevolent, and not of the aggressive type that also commonly occurred.⁵⁵ Such outsiders obviously did not often merit inclusion in the ancient texts. With regard to their actual experiences, we are often left to guess or to make do with peripheral remarks. For example, several authors suggest that throwing stones at ‘madmen’ was a common practice.⁵⁶ Augustine tells of a Christian ‘madman’ (*morio*) who humbly withstood the degradations of his fellow citizens, but forthwith threw stones, even at men of standing, if they dared to offend the Christian religion.⁵⁷ Could this have been a case of reversal or compensation for treatment that he himself was often forced to endure?⁵⁸

Nevertheless, the majority of people with mental disabilities were deployed in the labour market without problem. Most ancient occupations required only a simple level of intelligence. In this case as well, this situation (the most common in the ancient world) was not recorded in legal texts,

⁵⁵ Philo, *In Flaccum* 36–37; Artemidorus, *Oneirocritica* 3.42.

⁵⁶ Aristophanes, *Birds* 524–525; Plautus, *Poenulus* 295; Plutarch, *Pompey* 36.6. See Stok (1996: 2302–2303). Grassl (1988b: 112) has referred to the ‘therapeutic-defensive’ ritual aspect of such treatment. The experience of humiliation obviously remained for those involved.

⁵⁷ Augustine, *De peccatorum meritis* 1.32. ⁵⁸ Laes (2008b: 116).

with the exception of disagreements regarding slaves. Such texts confirm the general image. In general, Roman lawyers did not consider it right to require the seller of a mentally deficient slave to indemnify the buyer. Such cases did not involve any true ‘deficiency’ (*vitium*), a concept that lawyers usually reserved for physical problems. Only if the seller had concealed the slave’s mental problem at the time of the sale – this could also be applied to loafers with problematic behaviour or runaways – would he be held responsible and recompense be considered. In other words, as long as the slave could function as a labourer, there was not actually any problem.⁵⁹

In Search of Learning Disorders and Intellectual Disabilities

The [Introduction](#) provided a detailed discussion of the intriguing story from Livy about the young Manlius. We would like to know more about his ‘dullness’ (*tarditas ingenii*) and ‘speech problem’ (*infacundior... et lingua impromptus*), which led his shamed father to send him away to the countryside. The course of his highly successful political and military career appears to stand in contradiction. Any diagnostic interest was obviously completely alien to Livy.⁶⁰ The same can be said of the young Bradua, born around AD 145 as the son of Herodes Atticus and Regilla. We are told that the boy was not capable of learning to read. In despair, his father had purchased twenty-four slaves, each bearing a board with a letter of the Greek alphabet. Was Bradua dyslexic? In any case, he became *consul ordinarius* in the year 185, and he even went on to become *proconsul*.⁶¹ Augustine writes about adults who were so ‘dull minded’ that they failed to achieve even elementary literacy.⁶² The concept of dyslexia was foreign to the ancient authors, however, and we can only guess at the exact diagnostic cause of what Augustine describes.

One could even question the very possibility – for times in which there was no diagnostic-statistical approach to intelligence, no medical categorisations of standard values and/or normality, and an entirely different understanding of the concept of psychology – of addressing ‘intellectual’ disabilities or learning disorders. In an intriguing and provocative book, Chris Goodey argues that that is not possible. His *A History of Intelligence and ‘Intellectual Disability’* focuses primarily on the late Middle Ages and modern period. For Goodey, ‘intelligence’, ‘intellectual disability’ and

⁵⁹ *Digest* 21.1.4.3–4 (Ulpian). See Gevaert (2000: 78–80).

⁶⁰ Cf. above p. 14–16 and below p. 138.

⁶¹ Philostratus, *Lives of the Sophists* 551. See Pomeroy (2007: 48–50) on Bradua.

⁶² Augustine, *Epistles* 166.6.17. See Laes (2008b: 111).

similar concepts are no more and no less than historically contingent concepts, symptoms of and paradigms for a process by which a ruling class seeks to rank humanity. Quite recently, Chris Goodey has collaborated with Lynn Rose to repeat his controversial thesis for the ancient Graeco-Roman period. In a broad review article, they address a wide variety of ancient sources.⁶³ The Homeric antihero Thersites ('the ugliest of all who had come to Ilium, bandy-legged and lame of foot; rounded shoulders hunched over his chest; and above them a narrow head with a scant few hairs')⁶⁴ was, because of his contesting the aristocratic military leadership, proverbially 'foolish'. To the philosophers, an 'unreasonable' person is one who necessarily renounces reasonable insight. Writers of epigrams and satire are particularly skilled in confirming and reinforcing social prejudices.⁶⁵ Social inferiors are portrayed as 'idiots' in physical and mental terms, who are displayed at the banquets of the rich as voyeuristic entertainment. According to Goodey and Rose, however, any comparison between such 'fools' (*moriones*) and those with intellectual disabilities today is completely meaningless. Even ancient medicine had almost no interest in intellectual disabilities. The concept of 'naturally foolish' appears but once in the gigantic oeuvre of Galen.⁶⁶

The work of Goodey and Rose is an intriguing eye-opener, which constantly reminds us that historians who use contemporary medical and psychological categories to approach the past are skating on very thin ice: 'we find that we are clumsy foreigners, disoriented and barely literate'.⁶⁷ Their thesis guards us against obvious traps. When Tacitus tells of the 'feebleness of mind' (*ignavia animi*) of Julius Palignus, who liked nothing better than the company of clowns and jesters, he is not referring to a person with an intellectual disability. For a procurator of the province of Cappadocia, this would be hard to imagine.⁶⁸

One might wonder, however, whether Goodey and Rose might have relied primarily on sources that were likely to confirm their arguments. It would appear quite logical that the Homeric epics contain no medical analysis of 'foolish' behaviour and that, in the comedic-satirical tradition,

⁶³ Goodey and Rose (2013: 24–27) on Homer; (2013: 27–28) on philosophers; (2013: 29–33) on satire; (2013: 37–39) on medicine.

⁶⁴ Homer, *Iliad* 2.216–219 (trans. S. P. Scott).

⁶⁵ Contra: Gevaert (2002), who attempts to interpret Martial, *Epigrams* 6.39 and other sources as cases of cretinism or fragile X syndrome.

⁶⁶ Galen, *In Hippocratis Praedictionum librum I commentarius* 2.94 (16.696 Kühn).

⁶⁷ Goodey and Rose (2013: 17).

⁶⁸ Tacitus, *Annals* 12.49. Another symptomatic feature of ancient ideas is that the man is also described as being physically ugly and ridiculous (*deridiculo corporis*).

‘foolishness’ is used as a collective noun for almost all behaviour from which the aristocracy wished to distance itself.⁶⁹ Ancient philosophers wrote for the upper class, with little concern for the physiological impossibility of using reason. Even after reading the Goodey and Rose thesis, one is left with the feeling that people from the past must surely have noticed that some individuals were so disabled in their intellectual capacity as to jeopardise their ability to function socially.

A close reading of the body of ancient medical literature confirms this hypothesis. It is characteristic of the ancient physicians that they regard the soul as a material and physical entity. The duality of soul and body, which has had such a heavy influence on Western thought since Descartes, was alien to them. This is not to say that they were radical materialists or reductionists who would equate our thinking, feeling and acting with physical processes. They did argue that the body and the soul suffered together (the notion of *sympatheia*). Because he regarded the brain as an organ, Galen pondered medical treatment for intellectual disorders. In modern terms, we could argue that he would have sympathised with chemical explanations for afflictions of the brain.⁷⁰ In such a context, a dichotomy between mental and intellectual disorders, as proposed by Goodey, is hard to substantiate. Moreover, references to cognitive capacities were made as early as the Hippocratic corpus: people differ according to intellect, memory, concentration, speed of thought and stability.⁷¹ It was thought that a carefully balanced regime consisting of both nutrition and physical exercise could be used to treat even a ‘dumb’ person.⁷² The same author notes that certain afflictions cannot be cured. The list includes such character traits as irascibility or picking quarrels, as well as ‘simpleness’ – a clear reference to intellectual retardation.⁷³ This tradition continues for the whole of antiquity. As a late antique physician, Caelius Aurelianus saw that there was indeed a difference between ‘foolishness’ in the philosophical sense and a medical affliction with a material cause.

⁶⁹ Subtle analyses of foolishness and insanity in Homer and in Greek tragedy can be found in Saïd (2013) and Most (2013), respectively.

⁷⁰ The literature on the relationship between the soul and the body, a fundamental problem in Western thought, is obviously vast. For ancient medicine and the perspective of this book, Boudon-Millot (2013) and Holmes (2013) offer outstanding introductions. Thumiger (2013) provides an exhaustive study of the Greek medical vocabulary for mental disorders from the sixth and fifth centuries BC.

⁷¹ van der Eijk (2013: 312) summarises the passages from Hippocrates, *On Regimen* 35 (6.514–520 Littré).

⁷² Hippocrates, *On Regimen* 35 (6.514–516 Littré). The terms *phronêsis* and *aphrosunê* refer to cognitive capacities.

⁷³ van der Eijk (2013: 314–316), referring to Hippocrates, *On Regimen* 36 (6.522 Littré).

The Stoics also argue that there are two types of insanity (*furor*). The first is a sort of ignorance, such that anyone who is not wise is actually seen as insane. The other insanity emerges through the alienation of the spirit and through the body, which suffers along with the spirit. (Caelius Aurelianus, *Tardarum passionum* 1.144; p. 516 ed. Bendz)⁷⁴

In the eleventh century, the Byzantine author Michael Psellos even dedicates a tract to the question of whether some people are wise, while others are complete fools (*moroi*).⁷⁵

In the following section, I attempt to some extent to redeem the people behind the story of intellectual disability. Can we observe concrete cases of people with intellectual retardation in antiquity? I start with a case study that appears to confirm the Goodey-Rose thesis. I then proceed to a theologian who actually wrestled with the problem of intellectual disability and was unable to find a comprehensive answer.

The Jester Zercon

To many ancient historians, Priscus of Panium (ca. 410–ca. 475) is not exactly the best-known writer of history. Nevertheless, as a rhetorician, teacher of wisdom and politician/diplomat, he belonged to the highest elite of his time. Born at Panium in Thrace, he spent the greatest portion of his political career at the side of Maximianus. He was with him in Serdica (the current Sofia in Bulgaria), where he conducted negotiations with Attila the Hun in 448/449. In later phases of his career, he was in Rome, Damascus and Egypt. Following the work of Zosimus, his *History of Byzantium* (the title is undoubtedly apocryphal) treats Roman history in the period from 433 through 471. For nearly all of the events that he describes, he claims to have been an eyewitness.

The negotiations in the court of Attila had made a deep impression on him. In a relatively stereotypical manner, he describes the sumptuous eating and drinking habits in the court of the Huns. During the banquet, in addition to the performances of epic singers, a jester made his appearance:

After the songs a Scythian, whose mind was deranged (*phrènoblabès*), appeared, and by uttering outlandish and senseless words (*allokota, para-sèma, ouden hygies*), forced the company to laugh. After him Zercon the Moor entered. (Priscus, fr. 1 Blockley = fr. 8 Bornmann; trans. J. B. Bury)

⁷⁴ See Gourevitch (1991a).

⁷⁵ Kellenberger (2011b: 12) for additional literature on this treatise.

Priscus of Panium was one of the classicising historians of late antiquity. The Greek that he used could just as well have flowed from the pen of a classical Greek author from the fifth or fourth century BC. The vocabulary of the ‘intellectually disturbed’ that he uses here is thus also thoroughly classical, as are his three-pronged stylistic tendencies. In a similar classical writing style, ‘the Scythian’, following Herodotus, represents all that is barbaric and outlandish. Most likely, this is simply a reference to a Hun. ‘The Moor’ undoubtedly refers to a person with dark skin.

We learn more about Zercon in an extensive second fragment. His physical appearance was ugly, and his peculiar manner of speech (lisp?) and general appearance (or: his eyes?) made him an object of ridicule. He was short and hunchbacked, with twisted feet and a flat nose that was distinguishable only because of the nostrils. Once again, Priscus’ description bears a heavy ‘literary tint’: his classically schooled reading audience would have immediately recognised references to the legendarily ugly Aesop, to the anti-physiognomic insults or taunts contained in ancient literature and to the standard descriptions of black people.⁷⁶ During a campaign in Africa (ca. 425–430), Zercon had been given as a gift to the Alanic general Flavius Ardabur Aspar, who was fighting in the service of Rome. In 441, during the campaign with the Huns in the Balkans, he was captured by Bleda, the brother of Attila. He became especially fond of his Moorish plaything. Zercon had to accompany his new master to parties and on military campaigns. During expeditions, he was outfitted with oversized armour, to the great merriment of the court. One day, Zercon ran away. He was brought back in chains by his master, who asked him why he had escaped. Zercon humbly replied that his escape had been a crime, but that there had been a good reason for it. He was missing a woman. This caused Bleda to burst out laughing and to give him one of the Hunnish queen’s ladies in waiting, a beautiful woman who had fallen out of favour for some further unspecified deed.⁷⁷

There is even more to read about the unfortunate Zercon. After Bleda’s death in 445, Attila – who, unlike his brother, had developed a passionate hatred for the jester – gave Zercon to the Roman general Aetius during negotiations. These discussions were held at the Sava River in the year 449. We are thus brought back to the year in which Priscus participated in the negotiations with Attila as a diplomat and eyewitness:

⁷⁶ Lissarrague (2000) on Aesop (cf. pp. 130, 151, 179); Weiler (2012) on anti-physiognomics; Snowden (1970) on blacks in antiquity.

⁷⁷ Priscus, fr. 2 Blockley = fr. 11 Bornmann = Suda Z 29.

Edecom had persuaded him to come to Attila in order to recover his wife, whom he had left behind in Scythia [when he had been sent by Attila as a gift to Aetius]; the lady was a Scythian whom he had obtained in marriage through the influence of his patron Bleda. He did not succeed in recovering her, for Attila was angry with him for returning. On the occasion of the banquet he made his appearance, and threw all except Attila into fits of unquenchable laughter by his appearance⁷⁸, his dress, his voice, and his words, which were a confused jumble of Latin, Hunnic, and Gothic. (Priscus, fr. 3 Blockley = fr. 8 Bornmann; trans. J. B. Bury)

What can we now learn about Zercon in retrospect, with ‘objective certainty’? Priscus’ description is interlaced with literary references to such legendarily ugly figures as Aesop or the crippled god Hephaestus. The ‘odd’ voice and lisp could be explained according to the interpretation that all non-classical languages (everything that was not Greek or Latin) were regarded as barbaric and almost animal-like. The small body structure and the oversized harness are certainly not enough to establish a diagnosis of dwarfism. Moreover, the texts contain no evidence at all for mental retardation, unless we confuse Zercon with the ‘Scythian jester’ who performed at the banquet. In the anti-psychiatric model developed by Foucault, such diagnoses are completely inappropriate. Only the ‘authoritarian smile’, the mechanism endowing certain people with the power to use humour to belittle others, is important in this regard. From this view, Goodey is absolutely right: the issue of a medical diagnosis of Zercon’s intellectual capacity is completely irrelevant.⁷⁹ Nevertheless, for Priscus, Zercon was not a literary myth, but a living reality. The description of his remarkable nose and facial features, the fact that he was black and outfitted in oversized armour – these details would have been difficult to fabricate out of whole cloth. From the perspective of human rights, this description confronts us with a man who had been taken out of his African homeland through abduction/purchase (?) by an Alanic gentleman in the service of Rome, subsequently becoming the darling of a Hunnish monarch, making an unsuccessful attempt at escape, acquiring in a relatively bizarre manner a wife – whom he would then lose because he was not in the favour of Attila – and once again being given away and, ultimately, as an object of humour – and in a hodgepodge of the languages that he had acquired throughout his eventful life – requesting the return of his wife.

⁷⁸ A reference to Homer, *Iliad* 1.599 (on the god Hephaestus, who appears at the divine banquet).

⁷⁹ Goodey (2011: 237–238) offers penetrating treatments of early modern jesters and their observation by scholars of that time.

Admittedly, nothing else can be said with certainty about Zercon's mental capacity. Nevertheless, historical works on trauma and processing (a history that has largely yet to be written) indicate that people in all eras have survived in a type of resignation by pretending.⁸⁰ It would seem plausible that something along these lines occurred in the case of Zercon. For his masters, he was a bizarre madman, an exotic plaything, of the same status as the other 'disturbed' jesters who graced the banquets. Furthermore, the existence of entertainers with intellectual disabilities has been a constant throughout history, even into the present.⁸¹

Augustine and the Problematisation of Intellectual Disabilities

It is in the works of St Augustine that intellectual disability is first treated as an actual problem. The church father clearly wrestled with this, and not only on a theoretical level. In more than twenty passages, he mentions possible intellectual disabilities, with the word *fatuus* appearing most frequently. The variation *naturaliter fatuus* suggests a congenital intellectual disability.⁸² This was undoubtedly influenced by Augustine's familiarity with the Vulgate, in which *fatuus* appears thirty-two times.⁸³ 'Mourning for the dead lasts seven days, for the foolish and ungodly all the days of their lives'; 'and I saw, among the callow youths, I noticed among the lads, one boy who had no sense'; and 'He who fathers a stupid child does so to his sorrow, the father of a fool knows no joy' are amongst the passages in the Old Testament that possibly refer to intellectual disabilities, although the entire context remains somewhat vague, and interpretations of recklessness and foolishness are plausible as well.⁸⁴

Nevertheless, some passages from Augustine appear to be clear references to congenital intellectual disabilities. In his controversy with the Pelagians, who argued that the Fall had not corrupted human nature, he blames Julian of Eclanum for the fact that Pelagian optimism cannot explain why people are born with disabilities. In a typical rhetorical passage, the argument goes as follows:

⁸⁰ Carruth (1996) offers interesting insights that could be relevant for the study of antiquity.

⁸¹ Cf. the poetry and performances of Georg Paulmichl (born 1960), who has Down's syndrome. For Paulmichl, the syndrome is not a disability: '*ich bin nicht behindert, ich kann reden*'. See www.georgpaulmichl.com. I am grateful to Edgar Kellenberger for this reference.

⁸² Other words include *tardicors*, *obtunsus*, *excors* and *morio*. The passages have been collected and listed by Kellenberger (2011a: 57).

⁸³ Kellenberger (2011a: 57).

⁸⁴ Sirach 22.11–12; Proverbs 7.7 and 17.21 (*New Jerusalem Bible*). For the context (including the Hebrew) of these passages, see Kellenberger (2011b: 22, 36 and 121).

You are surely not so foolish (*fatuus*) as to deny that foolish characters (*ingenia fatua*), I mean foolish people (*homines fatuos*) are born? Listen to how your own foolishness (*fatuitate*) contributes to the insanity (*dementiam*) of the Manichaeists. (Augustine, *Opus imperfectum* 3.160)

Whereas it could be argued that, in this passage, Augustine is attempting to ridicule his theological opponent, thus referring to ‘philosophical’ foolishness, other passages leave nothing to the imagination. How can it be that God, in His infinite goodness, allows people to be born with intellectual disabilities? Augustine wonders many times:

How can it be that the image of God (i.e. a person) is born with such an aberration of the mind? The strength of age, the course of the years, the efforts of study, the diligence of the teachers, the fear of the whip: nothing helps. I do not mean to say that nothing helps to achieve wisdom. Such a person cannot learn even the simplest useful skill. (Augustine, *Opus imperfectum* 3.161)

It is difficult not to see this passage as a reference to intellectual retardation. In another passage, the patriarch mentions ‘simpletons’ (*moriones*) who fetch a great deal of money on the slave market. Their ‘silliness’ (*fatuitas*) is amusing.

Now, although a man may be amused by another man’s silliness (*fatuitas*), he would still dislike to be a simpleton himself; and if the father, who gladly enough looks out for, and even provokes, such things from his own prattling boy, were to foreknow that he would, when grown up, turn out a fool, he would without doubt think him more to be grieved for than if he were dead. (Augustine, *De peccatorum meritis* 1.66; trans. P. Schaff)

The ancient wording comes across as harsh. ‘It would have been better if you had not been born’, we read in some epitaphs, expressing the fact that the death of a child had caused his parents great grief. These are ‘other’ customs for expressing grief, which we, from our contemporary point of view, should surely not dismiss as heartless, coarse or cold.⁸⁵ It sounds even more alien to us when such people are compared to animals or, more specifically, to livestock.⁸⁶

Some are forgetful, others slow-minded and some so insane and foolish that one would prefer to live amongst livestock than with such people. (Augustine, *Opus imperfectum*. 6.16)

⁸⁵ Laes (2004: 53–54) on such ‘harsh’ expressions of grief.

⁸⁶ Similar concept is in Augustine, *Epistles* 166.617; *Opus imperfectum* 3.10; 5.18. See Kellenberger (2011a: 59).

Here again, a typical ancient equation is at work: children, animals and, in some cases, even women are summed up in the same breath, as they do not (or do not yet) possess adult reason. This obviously does not mean that these categories were placed on the same level in daily life.⁸⁷

The clearest reference to an intellectual disability appears in a passage in which Augustine attempts to demonstrate the absurdity of the doctrine of reincarnation. In this passage, he clearly refers to a particular group of people who should be distinguished from the ‘feeble-minded’ and those whose congenital deficiencies qualified them as entertainers:⁸⁸

who would not affirm that those had sinned previous to this life with an especial amount of enormity, who deserve so to lose all mental light, that they are born with faculties akin to brute animals, – who are (I will not say most slow in intellect, for this is very commonly said of others also, but) so silly as to make a show of their fatuity for the amusement of clever people, even with idiotic gestures, and whom the vulgar call, by a name, derived from the Greek, *moriones*? (Augustine, *De peccatorum meritis* 1.32; trans. P. Schaff)

For Augustine, this is also clear: we are all wanted by God, all people shall be saved through God’s grace. His list contains an explicit mention of fools.⁸⁹ Such people also reflect the mercy and goodness of God.⁹⁰ A pressing question remains: how could God allow such suffering from birth – or, for that matter, any other pain and/or disabilities in newborns? For questions regarding the origin of the soul, Augustine still tended towards ‘creationism’.⁹¹ Upon biological conception, the soul is immediately created by God. But God would surely not wish any evil for the soul? For this reason, intellectual disability is explained as an ‘accident’, and not as a creation of God. It is a sort of ‘vice’ of nature – an ‘error’ of nature that is tolerated by God. Another ‘relief’ that is advanced is original sin, which made suffering an inseparable part of human existence after the Fall.⁹²

⁸⁷ Wiedemann (1989: 18–25); Laes (2011a: 283).

⁸⁸ Goodey and Rose (2013: 31) do not regard this passage as a reference to intellectual retardation. Contra Kellenberger (2011b: 135).

⁸⁹ Augustine, *Encheiridion* 103: *doctos indoctos, integri corporis indebiles, ingeniosos tardicordes fatuos*. On the doctrine of mercy, see Kellenberger (2011a: 62).

⁹⁰ Augustine, *De peccatorum meritis* 1.32. ⁹¹ Kellenberger (2011a: 61); (2011b: 135–138).

⁹² Augustine, *Opus imperfectum* 3.160: *natus est enim fatuus accidente vitio, homo autem creatus est operante Deo . . . Quae fatuitas non est natura atque substantia, quae non nascitur nisi creante Deo, sed eiusdem naturae vitium, quod accidit sinente Deo*. *Opus imperfectum* 3.161: *Ita constat Deum bonum malos non creare, quemadmodum constat Deum sapientem fatuos non creare*. On the Fall of Man and original sin in this context: Kellenberger (2011a: 64).

The details of the theological discussion are of little consequence in this context. What should attract our interest is the fact that the problem of intellectual disability does indeed appear in the works of the ancient authors when it is relevant. In a monotheistic religion, in which the world is seen as desired and created by one almighty God, the issue of suffering and imperfection poses a particular problem. Moreover, the focus of Christianity extends to all people, not to a restricted elite.⁹³ About fifty years after Augustine, Priscus of Panium felt no need to theorise about the backgrounds of the jesters at the banquets he described. The opposite would be surprising in a historiographical work addressing politics and military history. This did not make the absence of people with intellectual disabilities any less realistic. The descriptions by Priscus and Augustine constitute two sides of the same coin, although time has taken a particular toll on the Priscus side, such that much remains obscure to our eyes.

Anecdotal Evidence for 'Mental Disorders'

Following the DSM in our search for intellectual afflictions in ancient literature, the second section of this chapter provides an explanation for why such attempts are doomed to failure from the outset. It is clear, for example, that the ancient concepts of *melancholia* and *mania* cannot simply be equated with our own concepts of depression and mania.⁹⁴ The search would undoubtedly become a chronic anachronism, as observed by the Gourevitches in a series of articles investigating psychological disorders in ancient texts.⁹⁵ Nevertheless, the two authors – one a psychiatrist and the other an ancient historian – do take on the challenge to a certain extent. Although we know that ancient classifications are quite different from contemporary psychiatric categorisations, it is still possible to recognise some phenomena. A certain degree of overlap between the terms is inevitable. The search obviously yields remarkable, even intriguing anecdotes.

One extremely well-known example is the legend of Pygmalion, who, disgusted by the deceptive female sex, creates a beautiful ivory statue of a woman and promptly falls in love with his creation, whom he has named Galatea. Agalmatophilia is the contemporary psychiatric term for a paraphilia involving a form of fetishism focusing on sex with an object

⁹³ On monotheism and the problem of disability, see Kellenberger (2011b: 155–157).

⁹⁴ Godderis (2008: 21–25).

⁹⁵ Gourevitch and Gourevitch (1980a and b); (1981a and b); (1982).

(mannequin, statue). One could thus suppose that ancient readers of Ovid were able to recognise a similar phenomenon in Pygmalion – who kissed his beloved statue passionately – without going further to problematise it or develop the concept. The story of Pygmalion is not unique in ancient literature. Lovesick for Praxiteles' nude *Venus*, the young man Callicratidas – who was known for his predilection for boys – had himself locked up in her temple in Cnidus for a night in order to have sex with the statue 'in the manner that men do with boys'. The next day, when the *Venus* showed traces of the act, the culprit killed himself out of shame. Ancient authors recount these anecdotes with a wink and without shame, as in the description of a certain Cleisiphus, who fell in love with a statue but ultimately used a piece of raw meat, as he was unable to penetrate the cold stone statue.⁹⁶

In his *Histories*, Herodotus immortalises several 'mentally disturbed' individuals. What should we say of Periander, the tyrant of Corinth, who distrusted and eliminated every rival, and who had sex with the dead body of his wife Melissa, whom he personally had murdered?⁹⁷ Or what can we make of Cleomenes of Sparta, who, after his return, became utterly insane, physically attacking any Spartan who crossed his path? His relatives had him locked up and bound to a block, but he was able to pilfer a knife from a guard by threatening him. With that knife, he embarked on a thorough self-mutilation: his legs from the bottom up to the thighs, his hips and flanks and, finally, the abdomen, which he whittled away until death ensued. According to some, his insanity had been caused by alcoholism, a habit he had acquired among the Scythians. Others propose that his delirium had become worse through the years, as punishment for his wrongdoings and sacrilege.⁹⁸ The insanity of the Persian monarch

⁹⁶ Gourevitch and Gourevitch (1981b). The best-known version of the legend of Pygmalion in Ovid, *Metamorphoses* 10, 243–297. For Callicratidas, see Lucian, *Amores* 13–16. Another homosexual version, this one on statues of young boys in Delphi, in Athenaeus, *Deipnosophistae* 606b. On Cleisiphus, see Athenaeus, *Deipnosophistae* 605f–606f. See also Vout (2013: 55 and 58) on statues and sexual attraction.

⁹⁷ Herodotus, *Histories* 5.92f–g. Periander's 'necrophiliac' deed is related to the notion of 'lost seed' through the begetting of bastards in his family. See Ogden (1997: 92–93). Also in relation to Periander are the accounts of his stable hands, who engaged in sexual relations with horses, thereby begetting a being that was half man and half horse. See Plutarch, *Septem sapientum convivium* 149d–e. On necrophilia in antiquity, see Gourevitch and Gourevitch (1981b: 1124). Cazzuffi (2013) highlights how the accusation of necrophilia is one of the standard charges lodged against tyrannical rulers in antiquity. As recounted by Parthenius, *Erotica Pathemata* 31, as a punishment for his wife's suicide, Dimoetes became infatuated with a female corpse that had washed up onto the beach.

⁹⁸ Herodotus, *Histories* 5.42 (insanity); 6.75 (confinement and suicide, punishment for misdeeds); 6.84 (drunkenness or punishment). See Ogden (1997: 124–130). See Gourevitch and Gourevitch (1982) for a clinical diagnosis of the Periander case.

Cambyes has also been related to his sacrilegious deeds, although Herodotus also mentions the congenital 'holy disease' (epilepsy), which had affected his brain.⁹⁹

When Alexander the Great removed his royal attire in Babylon for a ballgame with several friends, he never retrieved it. A silent young man appeared on the throne, wrapped in Alexander's robe and wearing the royal diadem. After a long period of silence, the youth admitted that he was Dionysus, from Greek Messenia, who had spent a long time in prison. While there, Serapis had appeared to him. He had loosened his chains and brought him to the throne, commanding him to don the royal outfit. Psychiatrists might see the poor wretch as a psychotic with a delusional imagination. The ancients interpreted his behaviour as a bad omen of Alexander's impending death.¹⁰⁰

Armed with Greek and Latin lexica, we can go in search of depression in ancient sources. Such searches have been conducted in various locations, including in the case of Cicero. He had never truly recovered from the death of his daughter Tullia in 45 BC. His correspondence is full of anxieties, deep despondency, dejection and sorrow.¹⁰¹ No matter how intensely one reads the Ciceronian texts or other sources, however, one always encounters the same barrier. Although it is relatively easy to find individual passages that the DSM might attribute to depression, accounts of feelings that would cover the complete medical diagnosis of the phenomenon are nowhere to be found. Nevertheless one occasionally stumbles upon descriptions bearing a surprising resemblance to the modern concept of depression:

Melancholia is an affliction that affects the intellect, with feelings of pronounced dejection and disgust, even for the things that are held most dear. (Galen, *Medical Definitions* 247 [19.416 Kühn])

Another example is deep *tristesse*, which appears primarily in old age (the Latin *veternus*):

It is an internal disease ... that makes people despondent. (Servius, *Commentary on Virgil's Georgics* 1.124)¹⁰²

⁹⁹ Herodotus, *Histories* 3.30–38 (list of misdeeds committed due to insanity); 33 (epilepsy).

¹⁰⁰ Plutarch, *Alexander* 73–74. Psychiatric interpretation in Evans, McGrath and Milns (2003: 326).

¹⁰¹ Stok (1996: 2323). Remarkable passages include Cicero, *Letters to Atticus* 12.14.8 and 12.15; Plutarch, *Cicero* 32.4. See also Puliga (2015).

¹⁰² Servius attributes the disease to an excess of water in the body: hydrops.

If we are to believe Augustine, there was even a heathen goddess of depression, Murcia, who hardly moved at all and who made people listless, lazy and inactive.¹⁰³

In a touching passage, the physician Aretaeus of Cappadocia describes a man who continuously appeared to be despondent and dejected. The doctors diagnosed him as ‘melancholic’. In reality, however, he was in love with a girl and had never expressed his love. Once he finally did so and his love was requited, the melancholy disappeared on its own. Love had cured him. In this case, Aretaeus draws a distinction between a ‘reactive depression’ – a response to a specific situation, which can be cured once the situation is resolved – and a more permanent state that can be attributed to biological factors (in ancient thought, the doctrine of bodily humours). In the same chapter, Aretaeus argues that melancholy can be the beginning of mania. Individuals suffering from mania alternate between periods of great joy and intense sadness, while most of those with melancholia are only despondent and distrusting. Once again, it would be a gross exaggeration to equate the manic patients of Aretaeus with those currently suffering from bipolarity, or manic depression. Some observations do correspond, however, and the relationship between ‘depression’ and ‘mania’ is used in both models of interpretation.¹⁰⁴

In the same way, it is unjustifiable in medical-historical terms to write about the ancient perception of psychosis. In this case as well, however, the ancient physicians were aware of the existence of various types of illusions or hallucinations. For example, religious mania was the divine inspiration that affected the seers and prophetesses of Delphi and Dodona, and pathological mania could be explained as the exhaustion of the spirit due to physical-biological factors.¹⁰⁵

We read about phobias in the fifth and seventh volumes of the Hippocratic *Epidemics*. A certain Nicanor suffered from a fear of flute music in the symposium: whenever a girl entered the drinking

¹⁰³ Augustine, *City of God* 4.16; Arnobius, *Adversus nationes* 4.9. The etymology has been contested. It could also refer to Venus Murtia (named for the myrtle), who had her own temple in Rome. See Servius, *Commentary on Virgil's Aeneid* 8.636.

¹⁰⁴ Aretaeus, *De causis et signis diuturnorum morborum* 1.5. Nuance regarding the absence of bipolarity and certain similarities in observation include Angst and Marneros (2001: 6). According to Jouanna and Boudon-Millot (2013), the ancient concept of insanity is essentially bipolar (depression-hyperactivity). Nutton (2013: 124) on Galenic melancholy as bipolar.

¹⁰⁵ Caelius Aurelianus, *Tardarum passionum* 1.44 (p. 514 ed. Bendz). The tradition of religious mania can be found in Plato, *Phaedrus* 244a–245b, 265a–b. See Jouanna and Boudon-Millot (2013: 103–108) and Vogt (2013: 181–186) on the Platonic conception of religious mania. For religious irrationality and insanity, Dodds (1951) remains the classic work.

establishment with an *aulos*, he would become terrified. His companion Democles had such a severe fear of height that he would avoid even the smallest bridge, preferring instead to crawl through the canal running under it. These are interesting and amusing case stories. Upon closer inspection, however, the explanation changes. The flute players in symposiums often offered sexual services as well. From an ancient medical perspective, it would thus also be plausible that both men suffered from a fear of 'boundary situations', with sexual dysfunction being Nicanor's greatest fear.¹⁰⁶

The list of remarkable similarities to the DSM can be extended. In his *Tetrabiblos*, the astronomer Ptolemy from the second century AD ascribes a number of 'pathological affectations' of the soul to the position of the heavenly bodies at the time of conception. These 'diseases' were also associated with the images of men who effeminately and passively surrender themselves to sexual pleasure. They are shameless figures. It is remarkable to note that Ptolemy does not suggest any therapy for these people, while he does so for other diseases. Is he therefore implying that passive homosexuality should be regarded as an incurable affliction? The pathological explanation of this form of sexuality also appears in the works of Caelius Aurelianus.¹⁰⁷

The files on ancient alcoholism are quite extensive. Alcohol and intoxicating substances in general were of particular interest to physicians, as their effects clearly illustrated the influence of the material state of mind on human actions and temperament.¹⁰⁸ In addition to physicians, moralists and Church Fathers were aware of the dangers of excessive drinking for the nervous system and the digestive system, as well as the social consequences. Pliny the Elder devotes an entire chapter to the dangers of drinking. Augustine recounts how his mother Monica had developed a 'habit of drinking' (*vinulentia*), of which she was cured. This is yet another indication that comes quite close to alcoholism. Nevertheless, the American Medical Association did not define the term as a disease until 1956.¹⁰⁹

¹⁰⁶ King (2013) for a subtle close reading of Hippocrates, *Epidemics* 5.81 and 82, 7.86 and 87. For flute-playing, cf. below p. 68.

¹⁰⁷ Ptolemy, *Tetrabiblos* 3.15, as commented upon by van der Eijk (2013: 333–337). Caelius Aurelianus, *Tardarum passionum* 4, 132, as commented upon by Schrijvers (1985).

¹⁰⁸ Godderis (2008: 70–71), with reference to Galen, *Quod animi mores corporis temperamenta sequantur* 3 (4.72–779 Kühn). For this reason, drunkenness is a central theme in Seneca, *Epistles* 83. See Stok (1996: 2351–2353).

¹⁰⁹ Medical and social consequences of drinking: Galen, *De sanitate tuenda* 1.11 (6.55 Kühn). Moralists: Pliny the Elder, *Natural History* 14.137–148. Church Fathers: Augustine, *Confessions* 9.8. Biblical fragments, including Genesis 9.20–27 (Noah's drunkenness) or warnings in Prov.

In Galen, we can occasionally even read about people who gorged themselves on sweets and cakes. In this case as well, we must consider whether such fondness for sweets (*lichneia*) and gluttony (*gastrimargia*) can simply be equated with bulimia.¹¹⁰

We can extend the list of remarkable mental disorders in ancient texts to our hearts' content, but to do so would be beside the point. We are ultimately confronted with the same fact. Although ancient authors did indeed recognise phenomena that contemporary psychiatry classifies as pathologies, any attempt to equate ancient and modern terminologies is problematic.

Classifications by Ancient Physicians

It therefore seems wise to examine the subdivisions as they were developed by the ancient physicians themselves. For the period addressed in this book, various physicians would qualify. The encyclopaedist Celsus (first century AD) is quite 'classical' in his systematisation, in which he distinguishes three forms of intellectual illness (*insania*): *phrenitis* (accompanied by fever), *melancholia* (characterised by the presence of black bile) and *mania* (a frequently incurable form of *furor*).¹¹¹

Aretaeus of Cappadocia lived in the first century AD and wrote in Greek about the causes, symptoms and treatment of both acute and chronic diseases. He was clearly a practitioner who devoted considerable attention to writing notes on actual disease histories and the relationship between the patient and the physician. According to Aretaeus, *phrenitis* was an acute disease that could appear suddenly, while *melancholia* and *mania* were of a long-term nature, thus falling into the category of chronic diseases. In the Hippocratic tradition, he is quite attached to the doctrine of bodily humours in the explanation of intellectual disorders.¹¹² Caelius Aurelianus' Latin work on acute and chronic diseases was compiled around the year 400 in Numidia. Although he also reports patient histories,

23:29–35. The literature on drunkenness in antiquity is vast. See d'Arms (1995); Gourevitch (2013b); Laes (2013a).

¹¹⁰ Galen, *De propriorum animi cuiuslibet affectuum dignotione et curatione* 2.4 (5.5 Kühn) and 6.1 (5.29–30 Kühn). See Godderis (2008: 84 and 101).

¹¹¹ Celsus, *On Medicine* 3.18.1 (*phrenitis*); 3.18.17 (*melancholy*); 3.18.6 (*incurable madness*). For extensive discussion on Celsus, see Stok (1996: 2330–2341).

¹¹² On Aretaeus, see the excellent introduction, translation and commentary by Grmek, Gourevitch and Laennec (2000) and the overview article by McDonald (2009). See Aretaeus, *De curatione acutorum morborum* 1.1 (*phrenitis*); *De curatione diuturnorum morborum* 1.5 (*melancholy*); 1.6 (*mania*).

Caelius Aurelianus is more theoretically inclined. Even for him, however, *phrenitis* is an acute disease, while *mania* and *melancholia* are chronic.¹¹³

With regard to the interpretations that each of these authors offered concerning mental disorders, one could write several books, in which the minds of readers could easily be dazzled by entire series of medical-technical details and subtle differences according to the schools to which the writers belonged. In the following section, however, I focus on Galen, the most influential physician from antiquity, who devotes considerable attention to mental disorders throughout his enormous oeuvre. For each category, we consider Galen's definitions of concepts and the examples with which he attempts to illustrate his categories.¹¹⁴ Only hysteria is left out of this discussion. To the ancients, women were simply more fickle and emotional, because their wombs 'wandered around' their bodies. Greek and Roman descriptions of hysteria thus to a large extent transcend mental afflictions.¹¹⁵

Phrenitis

According to Galen, 'true' phrenitis should be distinguished from delirium or hallucinations by a major episode of fever.¹¹⁶ In this regard, he is stricter than most other physicians. The brain is also immediately affected by high fever, but only as a consequence of the fever. It is not a disease of the brain in the strictest sense of the word. What this 'true' phrenitis actually is remains somewhat obscure. The symptoms obviously include hallucinations (both visual and acoustic), forgetfulness, feverish state and painful limbs.¹¹⁷ The Galenic interpretation is still best understood according to the following remark:

Some people suffering from phrenitis make absolutely no errors in their visual perception, but the judgements that they form according to these perceptions are based on abnormal thought processes. Others make no errors in judgement, but they have an impaired capacity for observation. Yet others are affected on both planes. (Galen, *De locis affectis* 4.2 [8.225 Kühn])

¹¹³ The article by McDonald (2009) contains further literature references. See Caelius Aurelianus, *Celerum passionum* 1 (the entire book is devoted to phrenitis); *Tardarum passionum* 1.144–180 (pp. 514–536 ed. Bendz) on mania; 1.180–184 (pp. 536–541 ed. Bendz) on melancholy.

¹¹⁴ For Galenic 'psychiatry', the studies by Godderis (1987), (1999) and (2008) are unsurpassed. A good recent overview article is Clark and Rose (2013). See also Stok (1996: 2371–2375). Mattern (2008: 173–202) describes 358 case histories of healing stories in Galen.

¹¹⁵ For this reason, Godderis (1987) and Goodey and Rose (2013) do not address hysteria. Dasen and Ducaté-Paarmann (2006) offer a good overview of ancient medical theories on hysteria.

¹¹⁶ Godderis (1987: 57–64); McDonald (2009); Clark and Rose (2013: 57–59).

¹¹⁷ Galen, *De locis affectis* 5.4 (8.329–330 Kühn).

Galen gladly serves us several examples of phrenetics. To the great amusement of the bystanders, a man was casting his furniture and household goods out of the window. When he asked if he should also cast out his slave/wool processor, the bystanders replied mockingly that he should do just that. When he actually did hurl down the unfortunate slave, however, the audience's pleasure disappeared immediately.¹¹⁸ The doctor Theophilus hallucinated about a group of flute players who disturbed his home day and night with their music. To the amazement of his housemates, he kept calling for the music to cease.¹¹⁹ In both cases, the patients later came back to their senses.

Phrenitis is apparently a temporary attack. For the man with the household goods, the cognitive processes were disturbed, but not the capacity for observation. Later, he was able to make an accurate inventory of the furniture that he had thrown out. Theophilus was subsequently aware of his own hallucination and could recount it exactly. The description of a rhetorician and a mathematician who could practise their sciences perfectly, but who regularly burst into uncontrollable fits of anger and cursing, is reminiscent of an ancient version of the syndrome of Gilles de la Tourette. For Galen, it was yet another illustration of phrenitis.¹²⁰

Mania

'A highly ambiguous and hardly operational term':¹²¹ with this description, Godderis provides a striking characterisation of mania (in Latin, *furor*). As with phrenitis, disturbed rational capacity and hallucinations appear to be at the core. Most importantly, however, mania is chronic-permanent and thus incurable, and characterised by the absence of fever. Galen would have been in complete agreement with Aretaeus' motto: 'There is but one mania, but a thousand expressions of it.'¹²² It should thus not be surprising that the tragic-comedic cases of melancholia that we encounter in the works of Galen are classified by Aretaeus and Caelius Aurelianus in more or less similar versions as mania.¹²³

¹¹⁸ Galen, *De symptomatum differentiis* 4 (7.61 Kühn); *De locis affectis* 4.2 (8.225–226 Kühn).

¹¹⁹ Galen, *De symptomatum differentiis* 4 (7.62 Kühn). Although Theophilus is not explicitly referred to as a *phrenetikos*, Clark and Rose (2013: 59) suggest that he could fit in this category. For flute-playing, cf. above p. 65.

¹²⁰ Galen, *In Hippocratis Praedictionum librum I commentarius* 27 (16.564 Kühn). See Boudon-Millot (2013: 138).

¹²¹ Godderis (1987: 64–72); Clark and Rose (2013: 59–60).

¹²² Aretaeus, *De causis et signis diuturnorum morborum* 1.6.1.

¹²³ McDonald (2009: 116). A man dreamed that he was a brick and no longer wished to ingest any fluid: Aretaeus, *De causis et signis diuturnorum morborum* 1.6.5; Caelius Aurelianus, *Tardarum passionum* 1.152 (p. 520 ed. Bendz).

Melancholia

Galen's thinking on melancholia is also complex and, at times, contradictory.¹²⁴ In general, he followed Hippocrates in the proposition that melancholics were characterised by an excess of black bile. This also explains his strong physical-material interpretation of the concept, which even leads him to distinguish people whose constitutions made them more predisposed to melancholia. People with dark skin, abundant hair and wide veins were the most susceptible.¹²⁵

We have already noted the remarkable Galenic definition of melancholia, which is somewhat reminiscent of modern depression. To him, anxiety and a heavy heart for a longer period are concrete symptoms of the disease.¹²⁶ They are also the two primary motives in his longer description:

Although every patient suffering from melancholia acts differently, they nevertheless all exhibit anxiety and despondency. They no longer experience pleasure in life, and they hate people. Not all melancholics wish to die. For some, the fear of death is the greatest concern during their melancholia. Others would appear quite strange: they fear death while simultaneously longing to die. (Galen, *De locis affectis* 3.10 [8.190–191 Kühn])

If we consider the examples of melancholic patients, however, we note that the term is applied quite broadly. A man believed that he was a snail and fled from everyone, because he was afraid that his shell would be trampled. Another imitated cockerels by flapping his arms like wings and reproducing their crowing. A third could not fall asleep, because he feared that Atlas would one day cease to hold up the heavens and that the collapse would usher in the total destruction of the earth.¹²⁷ The tragic-comedic anecdotes are continued in a Galenic tract known only in its Arabic translation. A man believed that he was made of clay and refused to go outside, for fear that he would be trampled. A woman was convinced that she had swallowed a snake, a man heard a dead person speaking to him as he passed a graveyard, and another passed wind in proximity to others and was subsequently so ashamed that he withered away in loneliness.¹²⁸ To us, it

¹²⁴ Godderis (1987: 72–88); Clark and Rose (2013: 60–63).

¹²⁵ Galen, *De locis affectis* 3.10 (8.182–183 Kühn).

¹²⁶ Galen, *De locis affectis* 3.10 (8.188 Kühn); *De symptomatum causis* 2.7 (7.202–204 Kühn). See Hippocrates, *Aphorisms* 6.23 (4.568–569 Littré).

¹²⁷ Galen, *De locis affectis* 3.10 (8.190 Kühn). See also *De symptomatum causis* 2.7 (7.202–204 Kühn) and Godderis (1987: 75) for other examples of delusions.

¹²⁸ Galen, *In Hippocratis Epidemiarum librum VI commentaria I–VIII* (487 Pfaff, Wenkebach; *CMG* v.10.2.2). See Godderis (1987: 74–75).

seems utterly strange that Galen ranks all of these cases under the same heading. Yet the continuous character of the delusional ideas, the anxiety and the social isolation appear to be the elements binding all the cases. The puzzle becomes even more complicated if we consider that Galen also distinguishes a 'delirium without fever' (*paraphrosune*). How does this differ from melancholia in the previously described cases?¹²⁹ Alternatively, should we see *paraphrosune* as an overarching term encompassing the phenomena of phrenitis and mania?¹³⁰ Galen's post-factum reasoning remains interesting. As a doctor, he establishes the uncommon behaviour and, on that basis, decides whether too much black bile is present in the patient. In medical history, even such phenomena as nightmares and lycanthropes (werewolves) were classified as melancholia. The melancholy of brilliant minds was often placed under the same heading.¹³¹

Morosis, Moria and Anoiā

At first glance, the Galenic categories of *morosis/moria* and *anoiā* appear to be described relatively clearly.¹³² They involve memory loss, often connected with reduced capacity for reason.¹³³ In contrast to melancholia or phrenitis, they do not involve any deviation of the cognitive processes through hallucinations, referring instead to deficiencies or weaknesses in the intellectual operation itself.¹³⁴ Closer examination reveals an abundance of diagnostic uncertainty in this case as well. Galen reports on the cure of individuals with memory loss. The first case involves an overworked student with a chronic sleep deficit. The second involves a vintner who had adopted a poor eating pattern and deficient diet during his long working days.¹³⁵ Nevertheless, Galen also mentions the condition of *anoiā*, which is the complete failure of the intellect and the memory.¹³⁶ In addition to describing *anoiā* as a possible final stage of phrenitis or melancholia, he advances the cooling of the brain as an explanatory

¹²⁹ Godderis (1987: 37–51). The case of Theophilus and the flute players can be classified under *paraphrosunē*. Cf. above n. 120.

¹³⁰ Nutton (2013: 123).

¹³¹ Aristotle, *Problems* 953a10–17. See Godderis (1987: 74–75) and Balin (2004). Broad overviews on the interpretation of the concept of melancholy in the history of Western culture and the history of medicine include Godderis (2000) and Starobinski (2011). On lycanthropy, see Metzger (2011) and (2012).

¹³² Godderis (1987: 51–58); Clark and Rose (2013: 63–64).

¹³³ Galen, *De symptomatum differentiis* 3 (7.62 Kühn).

¹³⁴ Galen, *De symptomatum differentiis* 3 (7.60 Kühn).

¹³⁵ Galen, *De locis affectis* 3.7 (8.165–166 Kühn).

¹³⁶ Galen, *De symptomatum differentiis* 3 (7.60 Kühn).

factor.¹³⁷ The hazardous use of such intoxicating substances as opium is also mentioned.¹³⁸ Finally, he associates complete memory loss and the cooling of the brain with old age. At an advanced age, some individuals can no longer recite the alphabet or know their own names.¹³⁹ According to Galen, plague victims in Athens, whom Thucydides claimed no longer knew themselves or their relatives, suffered from this affliction. The Galenic exposition of complete forgetting (in which he once again uses the term *morosis*) does not refer only to old people.¹⁴⁰

The conceptual confusion between ‘idiocy’, ‘insanity’ and ‘dementia’ remained within the field of psychiatry until far into the twentieth century. One should only think about the secrets of Alzheimer’s disease, which are today being revealed to us at only a very slow pace. Should we then be surprised that Galen’s expositions on memory loss remain vague?¹⁴¹

Epilepsy

We should also mention something about epilepsy, particularly given that the distinction between the mental and the somatic was unknown to ancient physicians.¹⁴² For Galen, the disease was at least associated with an affliction of the brain.¹⁴³ He also observed an association with melancholia: some epileptics were melancholic, and vice versa.¹⁴⁴

A rare form of epilepsy emerged, in which pain was felt in a body part – a pain that subsequently rose through the organs to the head.¹⁴⁵ Another form was related to the opening of the stomach, which could contract in a sort of hiccup reflex when eating pepper, after which the contraction of the stomach would continue as a convulsion of the brain.¹⁴⁶ In the context of the sensitive stomach, it is not necessarily surprising that Galen reports

¹³⁷ Galen, *In Hippocratis Praedictionum librum I commentarius* 2.94 (16.696 Kühn).

¹³⁸ Godderis (1987: 53).

¹³⁹ Galen, *De symptomatum causis* 2.7 (7.200–201 Kühn). See also Parkin (2003: 265).

¹⁴⁰ He discusses the brains of elderly people in Galen, *Quod animi mores corporis temperamenta sequantur* 5 (4.786 Kühn); *De locis affectis* 3.7 (8.165 Kühn); *In Hippocratis Praedictionum librum I commentarius* 2.94 (16.696 Kühn). See Siegel (1973: 274–275); Parkin (2003: 228–230).

¹⁴¹ Godderis (1987: 53–57) is an interesting historical overview on the confusion of psychiatric concepts in this material.

¹⁴² Siegel (1968: 308–315); Clark and Rose (2013: 65–66); Lo Presti (2013). Godderis (1987: 36) chooses not to address epilepsy in his overview of mental afflictions, as the condition is not included in the DSM IV.

¹⁴³ Galen, *De locis affectis* 3.11 (8.193 Kühn). ¹⁴⁴ Galen, *De locis affectis* 3.10 (8.180 Kühn).

¹⁴⁵ Galen, *De locis affectis* 3.11 (8.194–195 Kühn). The example cited involves a thirteen-year-old boy in whom the pain in the shin had started.

¹⁴⁶ Galen, *De locis affectis* 3.11 (8.199 Kühn).

successful treatments of epileptics through the prescription of a diet. In his exaggerated zeal for his studies, a literature student was not particularly cautious in his eating habits, and a grammarian was almost constantly troubled by epileptic seizures. Both realised long-term benefits from a carefully prescribed regimen.¹⁴⁷

Ancient ‘Psychotherapy’

Because ancient physicians attributed mental disorders to material processes in the body, they also believed that pharmaceutical substances could remedy intellectual diseases. For example, opium and other substances (e.g. oil or vinegar) were reported as having a calming effect.¹⁴⁸

For Aretaeus, the primary goal was to restore balance in the bodily humours. Given that phrenitis, mania and melancholia indicated an excess of warmth and dryness in the body, patients were to be treated with cooling and humidifying substances. This explains his suggestion to offer phrenitis patients an extended regimen of lukewarm soup and porridge, possibly enriched with meat, fish or grains. Physical exercise, baths and massage were considered useful as well.¹⁴⁹

As a physician of the Methodist school, Caelius Aurelianus was more likely to adopt an approach based less strictly on the Hippocratic doctrine of the humours. In his works, we read about such laxative (and relaxing) procedures as purging and blood-letting.¹⁵⁰ Without denying the importance of physical well-being and rest for the patient, he advocated withholding food for a specified period.¹⁵¹

In a modern-sounding passage, Seneca presents a discussion on the use of pharmaceuticals or behavioural therapy.¹⁵² Seneca cites Aristo:

If one should offer precepts to a madman [*furioso*] – how he ought to speak, how he ought to walk, how he ought to conduct himself in public and

¹⁴⁷ Galen, *De locis affectis* 5.6 (8.340–341 Kühn); *De sanitate tuenda* 6.14 (6.448–449 Kühn).

¹⁴⁸ Caelius Aurelianus, *Tardarum passionum* 1.173 (p. 532 ed. Bendz). The pharmaceutical side of ancient psychotherapy remains somewhat underexposed in the volume by Harris (2013). See van der Eijk (2013: 327–332) and Nutton (2013: 137–139) for Galenic therapy that sometimes, but not exclusively, involved pharmaceuticals.

¹⁴⁹ Aretaeus, *De curatione acutorum morborum* 1.1.8.

¹⁵⁰ Caelius Aurelianus, *Celerum passionum* 1.70 (p. 62 ed. Bendz); 1.167 (p. 114 ed. Bendz) – both for phrenetics.

¹⁵¹ Fasting for three days in Caelius Aurelianus, *Tardarum passionum* 1.158 (p. 524 ed. Bendz) (mania); 1.183 (pp. 538–540 ed. Bendz) (same treatment for melancholia); *Celerum passionum* 1.73 (p. 62 ed. Bendz) (for phrenetics). See McDonald (2009: 120–121).

¹⁵² Stok (1996: 2382–2383).

private, he would be more of a lunatic than the person whom he was advising. What is really necessary is to treat the black bile and remove the essential cause of the madness. (Seneca, *Epistles* 94.17; trans. R. Mott Gummere)

To this, Seneca replies:

And it is also wrong to believe that precepts are of no use to madmen [*insanos*]. For though, by themselves, they are of no avail, yet they are a help towards the cure. Both scolding and chastening rein in a lunatic. Note that I here refer to lunatics whose wits are disturbed but not hopelessly gone. (Seneca, *Epistles* 94.36; trans. R. Mott Gummere)

The ancient texts certainly contain examples of quite drastic shock therapy. With regard to phrenetics, Celsus argues:

If, however, it is the mind that deceives the madman, he is best treated by certain tortures. When he says or does anything wrong, he is to be coerced by starvation, fetters and flogging. He is to be forced both to fix his attention and to learn something and to memorize it; for thus it will be brought about that little by little he will be forced by fear to consider what he is doing. To be terrified suddenly and to be thoroughly frightened is beneficial in this illness and so, in general, is anything which strongly agitates the spirit. For it is possible that some change may be effected when the mind has been withdrawn from its previous state. It also makes a difference, whether from time to time without cause the patient laughs, or is sad and dejected: for the hilarity of madness is better treated by those terrors I have mentioned above. (Celsus, *On Medicine* 3.18.21–22; trans. W. G. Spencer)

Such therapy is mentioned several times in the works of Celsus.¹⁵³ There was also criticism of the practice, with the explicit description leaving no doubt about the current character of the shock treatment:

Others say that the insane should be treated with flogging, as if beating out faulty mental abilities would bring them back to their senses, even as their members, swollen from continual beating, cause a stinging pain. If they then recover from their affliction, once they have returned to their senses, they are tortured by the pain of the welts. To be sure, treatments should take place in close proximity to the diseased members. It is therefore necessary to apply blows to the mouth or to the head. (Caelius Aurelianus, *Tardarum passionum* 1.175 [p. 534 ed. Bendz])

At the same time, the physicians surely also considered milder forms of treatment. Celsus reports a discussion on light or darkness. For some, it

¹⁵³ Celsus, *On Medicine* 3.18.4; 3.18.10. See Stok (1996: 2390–2391).

appeared advisable to house the insane in a dark room; the darkness was calming. Others argued instead that darkness brought fear and that a large amount of light was needed. Celsus opted for a compromise. For some patients, darkness was more beneficial, while others would profit more from light. For yet others, it did not matter at all. Trial and error was thus advised.¹⁵⁴

Some observations provide evidence of a remarkable level of understanding for the patient. Aretaeus notes that murals in the room of a *phreneticus* would only provide distraction and sensory stimulation. It would be better to avoid such things in the sick room.¹⁵⁵ For patients with mania Caelius Aurelianus advised:

We have heard that they should receive the same treatment as *phrenetici*. They should thus first and foremost be placed in a location that is heated and that has plenty of light, with no noise or conspicuous paintings. The windows should not be too low, and the room should preferably not be located on the higher storeys, but on the ground floor. It is a common occurrence for madmen to hurl themselves to the ground. Their beds should be sturdy and placed away from the entrance, such that the patient does not see those entering the room and become even more agitated by seeing so many faces. The bedding should also be soft, their limbs should be massaged and, in some cases, restrained, albeit in a mild way. (Caelius Aurelianus, *Tardarum passionum* 1.155 [p. 522 ed. Bendz])

The list of mild and sympathetic treatments can be considerably extended.¹⁵⁶ Caregivers were expected to remain close by in order to point out hallucinations in a calm and inductive manner. Regular travel and a change of surroundings could offer relief. Music could soothe the tempers and cheer the thoughts. Reading to the patient could sharpen the attention of the intellect: good literature could make him cheerful, while a faulty reading could make him alert.¹⁵⁷ Even the ‘cleansing’ effects of theatre were not overlooked.¹⁵⁸

The most remarkable treatments are surely found in the precepts of Celsus for a patient suffering from delusional phobias:

¹⁵⁴ Celsus, *On Medicine* 3.18.5. ¹⁵⁵ Aretaeus, *De curatione acutorum morborum* 1.1.1.

¹⁵⁶ Stok (1996: 2384–2392).

¹⁵⁷ Caelius Aurelianus, *Tardarum passionum* 1.155 (p. 522 ed. Bendz) on servants; Celsus, *On Medicine* 3.18.23 and Caelius Aurelianus, *Tardarum passionum* 1.162 and 166 (pp. 526–528 ed. Bendz) on travel; Celsus, *On Medicine* 3.18.10 on music; Celsus, *On Medicine* 3.18.11 and Caelius Aurelianus, *Tardarum passionum* 1.162 (p. 526 ed. Bendz) on literature. Lain Entralgo (1958) offers an outstanding overview on verbal therapy in antiquity.

¹⁵⁸ Caelius Aurelianus, *Tardarum passionum* 1.163 (p. 526 ed. Bendz).

For some, it is necessary to relieve false anxiety, as in the case of the wealthy man who was afraid of starvation. False reports of inheritances were announced to him. (Celsus, *On Medicine* 3.18.10)

He advises the following treatment for persistent sadness due to melancholia:

Eliminate the fear and offer him hope. Seek relief in stories and amusement, primarily in those things that he enjoyed while he was healthy. Praise any effort that he makes and point them out to him clearly. He should be mildly reprimanded for his irrational sadness.

He should then be reminded of the things that concern him and shown why there is more cause for joy than for concern. (Celsus, *On Medicine* 3.18.18)

Today bookstores and audiences are deluged with accessible manuals for self-therapy. Philosophical counselling for life questions is particularly fashionable. Concrete steps are presented to explain how to cope with anger or frustration, how best to manage money, or the best way to frame infatuation. It is interesting to note that ancient physicians also concerned themselves with this form of self-therapy. They did not do so in any 'technical' capacity as physicians, but as cultivated *uomini universali*, for whom medicine was but one component of the knowledge of a well-rounded gentleman (Galen considered himself primarily a sage or philosopher). In addition to differences, often related to other psychological concepts, one can notice similarities between this form of ancient therapy and its current counterparts, including the pursuit of happiness, the dialogue between therapist and patient and the consultation strategies.¹⁵⁹

One of the most striking testimonies on ancient psychotherapy is the long, touching story about Galen who, as a doctor, called upon an aristocratic Roman lady suffering from insomnia. He was unable to reach her; she brushed off his questions, gave no answer and rolled over in her bed. Ultimately, she no longer wished to receive her doctor at all. Because Galen noticed that the lady in question had bathed and eaten normally, he arrived at the conclusion that there was absolutely nothing wrong with her physically, but that her illness should be investigated purely in the psychological realm. From a confidential conversation with her maidservant, he had learned that she was burdened by deep sorrow. One day, when Galen was once again paying a house call, he noticed that she blushed deeply when someone mentioned the name of the actor Pylades. He immediately

¹⁵⁹ Gill (2013) is an interesting overview of 'ancient preventive psychological medicine'.

took her hand and felt her increased pulse. A few days later, he subjected her to a test. During a house call, he had an assistant come in and mention the name of the actor Morphos. A day later, the assistant spoke of a third actor. Both times, there was no reaction. On the fourth day, however, when the name Pylades was mentioned again, her pulse once again increased sharply. For Galen, it was clear: the woman was lovesick.¹⁶⁰

Galen devoted three tracts to the passions and errors of the soul. They contain precepts on the quest for the ideal spiritual guide, who could steer one away from all flattery or social considerations and towards self-understanding. In some cases, such self-awareness can be destructive, and it offers no guarantee of happiness. Such happiness cannot be found until one learns to control the irrational passions in a reasoned manner.¹⁶¹ In this sense, philosophy was medicine for the mind.¹⁶² This topic, which has been the subject of seemingly endless study, may appear to be very distant from the subject of mental disorders. In the understanding of the ancients, however, the boundaries were somewhat different. The more an aristocrat was disturbed by the stirrings of his inner emotions, the worse he functioned. Self-control was a necessity.¹⁶³

Christians, Devils and Possession

Strange and socially inappropriate behaviour could also be attributed to the presence of a demon.¹⁶⁴ In such cases, exorcism meant healing. The New Testament mentions only a few cases involving the healing of ‘disturbed behaviour’ caused by a demon. Most of the stories involve physical illness caused by demons.¹⁶⁵ Jesus healed the ‘lunatic’ (i.e. epileptic) boy, who often fell into fire or water, by speaking sharply to the evil spirit and driving it out. The perception of epilepsy as caused by a demon appears to have been specifically Christian, based on the Jewish tradition.¹⁶⁶

¹⁶⁰ Galen, *De praenotione ad Posthumum* 6 (14.631–633 Kühn). Explained and translated by Godderis (2008: 38–40).

¹⁶¹ The three tracts, *De propriorum animi cuiuslibet affectuum dignotione et curatione*, *De animi cuiuslibet peccatorum dignotione et curatione* and *Quod animi mores corporis temperamenta sequantur* are introduced, explained and translated in Godderis (2008).

¹⁶² Cicero, *Tusculan Disputations* 3.6.

¹⁶³ The theme of philosophy as mental guide can be found in such works as those of Seneca, Epictetus and Plutarch. From the endless literature on ancient self-therapy, I mention only Van Hoof (2010).

¹⁶⁴ Physical disease could also be attributed to demons. See e.g. Luke 13.10–17 about a woman with a hunched back.

¹⁶⁵ Horn (2009a: 177–181) provides an overview of the rich literature on this topic.

¹⁶⁶ Matthew 17.14–20. See Wohlers (1999: 130); Horn (2009a: 181–182); Kelley (2011).

The most detailed version of the story is found in the Gospel according to Mark, in which we also observe that the boy had been ill from his earliest youth, and that he had been thrown into fire and water in order to drive out the spirit.

‘Master, I have brought my son to you; there is a spirit of dumbness in him, and when it takes hold of him it throws him to the ground, and he foams at the mouth and grinds his teeth and goes rigid . . . They brought the boy to him, and at once the spirit of dumbness threw the boy into convulsions, and he fell to the ground and lay writhing there, foaming at the mouth. (Mark 9.17–18, 20, *New Jerusalem Bible*)

In the end, only faith in Christ could save the boy. The father had already asked the disciples of Jesus to heal the boy, but they had been unable to do so. He was cured only when the father loudly exclaimed that he believed that Jesus spoke to the evil spirit in a commanding tone.¹⁶⁷

A man who lived on the other side of the Lake of the Gadarenes was possessed by an unclean spirit. He had once been chained hand and foot, but he had managed to free himself from his restraints. Now he wandered day and night among the tombs, torturing himself with the loose stones. The unclean spirit that tormented him revealed himself to Jesus as Legion, because there were many of them. The spirit was eventually cast into a herd of pigs: 2,000 animals stormed into the lake and drowned in the water. The possessed man was now clothed and in his right mind, to the great amazement of the residents. Jesus charged the man to proclaim in Decapolis the miracles that the Lord had worked for him.¹⁶⁸ Poorer in clinical-diagnostic details is the description of the possessed man who shouted to Jesus in the synagogue.¹⁶⁹

The topic of exorcism and the belief in demons brings us to a discussion of the causality of diseases (natural or supernatural), the ideal person for healing (doctor or magician) and the process of healing (treatment or miracle). Such discussions extend far beyond the issue of mental disorders, and they were conducted in ancient times as well. Attention to the phenomenon was surely not an exclusively Christian matter.¹⁷⁰ Historians have referred to an increased interest in demonology and magic beginning

¹⁶⁷ Mark 9.14–29. See also Luke 9.37–43. See Wohlers (1999: 130) and Horn (2009a: 181–182) on Jesus as a spiritual healer in the context of this story.

¹⁶⁸ Mark 5.1–20. See also Matthew 8.28–34; Luke 58.26–39.

¹⁶⁹ Mark 1.21–28; Luke 4.31–37. See also Matthew 15.21–28 and Mark 7.24–30 on the demon-possessed daughter of a Canaanite woman.

¹⁷⁰ For introductions to the issue, see the fundamental contributions by Amundsen and Ferngren (1986); Ferngren and Amundsen (1996); Horn (2009a).

in the late second century AD. Exorcisms play a prominent role in Christian literature beginning in the third century.¹⁷¹

The lives of the saints and apocryphal stories of the apostles dating from late antiquity are also rich in cases of possession or delirium, which are reminiscent of mental disorders.¹⁷² Once again, we should guard against any retrospective diagnosis. A boy was possessed by an unclean spirit and hanged himself.¹⁷³ The psychological background to the suicide can no longer be traced. Only seldom did the Church Fathers attempt to classify such pathological phenomena. Augustine reports that *phrenetici* should be distinguished from those who were possessed (*possessio*).¹⁷⁴ He maintains that hallucinations could also be caused by the ‘interference of another spirit, whether good or evil’. According to Harris, he thus ushers in the advent of medieval thinking on intellectual disorders.¹⁷⁵ Gregory of Tours also describes the case of a man who was possessed by ‘moon demons’ (*lunatici daemonii*). He notes that this case involves the disease that physicians refer to as epilepsy, or ‘falling sickness’ (*morbus cadivus*).¹⁷⁶

Chattering teeth, aggressive behaviour and frantic laughing – consistent with the New Testament passages cited above – are included in the standard descriptions of madmen. When a master saw his favourite slave boy, Algmana, lying and vomiting on the floor of the atrium, he was so moved by pity that he would have preferred the unfortunate wretch to die. This is not far from the death wish that we read in Augustine.¹⁷⁷ As with the possessed man at the Lake of the Gadarenes, wandering naked in desolate places, self-mutilation and/or aggression towards others also figure in the standard descriptions.¹⁷⁸

Confinement and restraint were remedies used at the time. The stories of the monks in Egypt bring us quite close to the reality of daily life, even among the lower classes. We read about a poor widow who was a washerwoman; her daughter crawled around naked in the miserable

¹⁷¹ Brown (1971: 49–57) remains a classic explication of demons and magic in late antiquity. See Ferngren and Amundsen (1996: 2965–2968).

¹⁷² Laes (2008b: 109–110); Laes (2011b: 49–50). ¹⁷³ Gregory of Tours, *Life of Andrew* 14.

¹⁷⁴ Augustine, *De Genesi ad litteram* 12.17.35–36.

¹⁷⁵ Augustine, *De Genesi ad litteram* 12.12.25. See Harris (2013b: 305).

¹⁷⁶ Gregory of Tours, *Life of Martin* 2.18.

¹⁷⁷ Gregory of Tours, *Life of Andrew* 29 on a household in which everyone was possessed; 34 about the boy on the floor. For the death wish, cf. above p. 59.

¹⁷⁸ The Arabic Life of Jesus 14, in *Ecrits apocryphes* I, pp. 216–217 (translation and commentary by Genequand) about a woman who walked naked through cemeteries and threw stones; *The Passion of Bartholomew* 7, in *Ecrits apocryphes* II, p. 798 (translation and commentary by Alibert, Besson, Brossard-Dondré and Mimouni) about the demon-possessed daughter of an Indian king who attacked everyone. The demon responsible is presented as an Ethiopian in this account.

shack. A boy suffering from rabies was restrained inside the house.¹⁷⁹ Shock therapy by flogging is mentioned as well.¹⁸⁰

One of the most remarkable stories involves a set of twins, as mentioned in the apocryphal Acts of John, written in Alexandria. They were lovely young men, but they had been possessed from birth by evil spirits. They functioned in social life, went to the bathhouses, participated in banquets and even served on the city council. Nevertheless, the terrible illness would strike almost daily. When they were thirty-four years of age, their father called a family council meeting and decided to poison them in order to end their suffering, as they were subjected to daily mocking and ridicule.¹⁸¹

That we are imprisoned in our language and categories is a comment that the reader will encounter many times throughout this book. For the domain of intellectual and mental disorders, the problem appears even more urgent than for other disabilities. It is simply easier to ascertain that a person is missing a leg or the sense of sight than it is to determine that someone is acting 'strangely' or not thinking 'normally'. My goal in this chapter, however, has been not only to address the problems emerging in the historical study of mental disorders. In my opinion, an accurate and cautious analysis of the available sources allows more than the determination that declaring a person insane is largely an expression of power by a society. Even for mental disabilities, there are cross-cultural bridges to be built between the present and the past. In this respect, I hope that I have rescued several people behind the story and that I have placed ancient life and thought in a sharper light.

¹⁷⁹ Sayings of the Desert Fathers N 263; *The History of the Monks in Egypt* 22.3.

¹⁸⁰ Gregory of Tours, *Lives of the Fathers* 7.2. ¹⁸¹ Acts of John 56.

*Blindness, a 'Fate Worse Than Death'?***Homer as 'Symbolic Blind Man'**

Both Greek and Latin authors considered blindness a fate worse than death. Yet blindness is there from the very first prominent figure in Greek literature.¹ *From Homer to Helen Keller: A Social and Educational Study of the Blind*: this is the title of a popular review on the education of blind people throughout history.² After more than two centuries of intensive research on Homer, classicists are likely to frown upon such a title. The authorship of the *Iliad* and the *Odyssey* is a complex matter, in which the interaction between a centuries-long oral tradition and the intervention of one or more brilliant composers played an essential role. Based on the language and dialect used, the inclusion of certain historical details and the appearance of episodes from these epics on Greek vases, we are able to situate the composition of these master works of Western literature in the second half of the eighth century BC. In this case, the name Homer is not much more than a symbol, a shade from the past, whose contours are nearly impossible to restore.

According to a persistent ancient tradition, Homer was blind; images from antiquity, peripheral comments by ancient authors and even several biographies clearly point in the same direction. The tradition continues in popular perceptions to this very day. It is for this reason, and not because of tracing any 'historical reality', that the oral tradition is important for anyone wishing to investigate the perceptions of blind people in antiquity. Numerous Greek lives of Homer exist, dating from the fourth century BC to the *Suda*, the massive Byzantine encyclopaedia from the tenth century. The most important is undoubtedly the *Life of Homer*, attributed to

¹ Sophocles, *Oedipus Rex* 1368. The *topos* continues through to Cicero, who provides an extensive discussion of blindness in his *Tusculan Disputations*. See Cicero, *Tusculan Disputations* 1.87 (*odiosa caecitas*); 5.29 (*incommoda*); 5.111 (*horribilis ista caecitas*). In the biblical tradition, we find the idea in Tobit 3.6 and 5.10.

² French (1932).

Herodotus. It is actually a work of literary fiction, written in the style of the father of historiography. Philologists have dated the work to the period from the fourth century BC to the third or fourth century AD. In any case, it was part of a lively literary tradition until late antiquity. The engrossing story contains important details for anyone wishing to write a history of blindness. Since it is hardly ever examined from this perspective, it is worth presenting it here.³

If we are to believe Pseudo-Herodotus, Homer was born in Smyrna. His mother, Cretheis, had been forced to leave her city of Cumae in Asia Minor in order to hide the scandal of an unwanted pregnancy. Her son was originally named Melesigenes, after the river along which he was born. The biographer adds that the child was not blind at birth. Although Cretheis' guardian had decided to entrust her to one of his friends in Cumae, the young woman decided to fend for herself. She chose to raise the child herself, earning a living through her own labour. After a while, her work as a wool processor brought her into contact with the school-master Phemios. She moved in with him, and her new husband accepted the young and talented Melesigenes as his own son. After the death of his foster father and, shortly thereafter, his mother, Melesigenes – now an adult – took over the school. In multicultural and cosmopolitan Smyrna, respect, prestige and 'international' contacts became his lot.⁴

Adventure beckoned. Upon the advice of the learned grain merchant Mentos, Melesigenes sold the school in order to explore the world. On the island of Ithaca, he contracted an 'illness of the eyes', from which he recovered, due to the efforts of a certain Mentor. The same affliction struck him again when he was in the city of Colophon. Nothing could help this time, and blindness became Melesigenes' fate.⁵

Upon his return to Smyrna, he devoted himself to poetry. In his birthplace, however, he had considerable difficulty making ends meet. He decided to go to Cumae. While on his way, he was received in the city of Neon by a shoemaker who had been moved to pity. The man allowed him to install himself in his workshop, where his songs made a great impression on everyone who passed by. Until this very day,

³ All *Lives of Homer* are collected in volume 5 of the 1912 *Oxford Classical Texts* edition of Homer by Thomas W. Allen.

⁴ Pseudo-Herodotus, *Life of Homer* 2–5. See Beecroft (2011) on blindness in the *Lives of Homer*.

⁵ Pseudo-Herodotus, *Life of Homer* 6–8. It is no coincidence that Mentor in the *Odyssey* is the former friend and advisor of Odysseus. Charged with the education of the young Telemachus, he remained on Ithaca. According to another tradition, Melesigenes became blind on Ithaca; see Pseudo-Herodotus, *Life of Homer* 7.

recounts Pseudo-Herodotus, the inhabitants of Neon show the place where the great poet once sat.⁶

Apparently, Melesigenes was not able to make a living from his art or the admiration of the inhabitants of Neon. 'Poor and barely capable of earning his keep', he left for Cumae. Artistic success was his part here as well. He sat on the seats of the Council of Elders and drew a large audience of admirers. He appealed to the city council for state support. In exchange, he would use his fame to enhance the city's prestige. One of the archons on the council objected. It would be better to support the poet like the other blind people in Cumae, in which 'an entire legion of useless' blind people were supported by the city-state. In the Aeolian dialect, *homeros* means blind – which was immediately declared to be the new name of Melesigenes. We should note that there is no consensus amongst biographers concerning the exact meaning of the name change. According to Plutarch, the term was applied to blind people because they needed guides.⁷ Insulted, the blind singer left the city. As a result of this insult, Cumae would never again produce a great poet.⁸

Homer now departed for Phocaea, where he was received by the schoolmaster Thestorides, who had become enthralled with his poetry. Once again, we read the description of the blind poet seated upon a chair reciting his poetry. Thestorides diligently took notes – and plagiarised. He left for the island of Chios, where he gave readings of the poems as if they were his own work.⁹

One day, merchants from Chios arrived in Phocaea. Homer sailed with them to Erythrai. After spending the night on the boat, he asked one of the mates to accompany him to the city – one of the only passages addressing the practical implications of Homer's relocations. None of the cargo vessels in the port was bound for Chios. Several fishers flatly refused to take the blind passenger along. After they had set sail and a poetic curse had been pronounced by the incensed Homer, they were faced with a headwind that drove them back to their point of departure. There, they encountered the poet. In exchange for his passage, he promised a safe journey. In this way, they finally reached Chios.¹⁰

⁶ Pseudo-Herodotus, *Life of Homer* 9–10.

⁷ The primary meaning of *Homēros* is 'collateral', 'hostage'. Plutarch explains the verb *homēreuein* as Ionic and Cunic dialect for 'to guide'. See Plutarch, *Life of Homer* 1.2 (p. 240 Allen). In Plutarch, *Life of Homer* 1.3 (pp. 240–241 Allen) we read yet another explanation. When the Lydians departed from Smyrna, the young Melesigenes offered himself as 'collateral, hostage' to the new rulers. According to this version, he and his mother had found their way to the court of Maion, the Lydian ruler over Smyrna.

⁸ Pseudo-Herodotus, *Life of Homer* 11–14.

⁹ Pseudo-Herodotus, *Life of Homer* 15–16.

¹⁰ Pseudo-Herodotus, *Life of Homer* 17–19.

What follows is one of the most remarkable passages from ancient literature regarding the life of blind people. Homer spent the night on the beach and then began to roam, eventually reaching the inhospitable region of Pitus. The next day, he was guided by the bleating of goats. Herding dogs barked at him aggressively, but the goat-herd Glaucus came to his aid. The goat-herd was particularly amazed that a blind man had thus come to such an inhospitable region, and he was moved to pity. He offered his unexpected guest a picnic, and Homer insisted that the hungry dogs be fed first.¹¹ After providing Homer with accommodation with his fellow slave, Glaucus departed for the village of Bolissus, where his master Chius lived. His initial reaction was far from positive. Chius 'blamed Glaucus for his stupidity in taking in and feeding maimed and enfeebled persons. However, he bade him bring the stranger to him.' Once he had discovered Homer's talents, he immediately hired him as a teacher for his children, who 'were of the proper age'. Here, Homer wrote several works for children, including the *Batrachomyomachia*, or the *Battle of the Frogs and Mice*. He also became quite famous in the city of Chios, such that the plagiarist Thestorides was forced to creep away in shame. He eventually established a school in the capital city, married and had two daughters.¹²

His success would once again lead him to travel: the next destination was Greece. On the way, he made a stop at Samos. He was recognised by someone who had known him in Chios, and he once again gained acclaim in Samos. He became an honoured guest at the Apaturian festivals, which were just then being held. At a crossroads, he bumped into a woman in the middle of making a sacrifice. 'Disgruntled at the sight' (perhaps the writer is suggesting that the priestess was disgusted by Homer's blind appearance), she ordered the poet to remove himself from the holy sacrifices. His response to the insult was a poetic curse against her in the form of hexameters. He eventually came to join the brothers of the *phratria* to experience the festival by the open hearth. He was highly honoured by the most prominent figures in the city. He spent the winter on Samos, where he resided with the wealthiest people and where he was always guided and accompanied by children from the villages.¹³

¹¹ Pseudo-Herodotus, *Life of Homer* 20–22. In Virgil, *Aeneid* 3.330 the blind Cyclops is accompanied only by his herd of sheep. He walks with a tree trunk that serves as a staff.

¹² Pseudo-Herodotus, *Life of Homer* 23–24 (master Chius); 25 (own school).

¹³ Pseudo-Herodotus, *Life of Homer* 29 (Apaturia); 30 (confrontation with priestess); 31 (feast); 32–33 (winter on Samos).

The following spring, Homer continued his journey. Upon his arrival at Ios, he fell ill. On the shore, throngs of people flocked to see and greet the great poet. Several sons of fishermen caught him off his guard with a riddle: 'What we have caught, we leave behind, and what we have not caught, we carry with us.' No one was able to solve the riddle. The solution was that the boys had picked lice from their own bodies and left those that they had found on the beach. The unfortunate Homer died on Ios. He died not of frustration at the unsolved riddle, Pseudo-Herodotus assures us, but of illness.¹⁴

Through the ages, interpreters and biographers of Homer have argued about the details of his blindness. According to some, it was pure nonsense: the poet's work contains so many visual details that blindness is out of the question.¹⁵ Others opt for an allegorical interpretation: Homer was 'blind' from his childhood because he had closed his eyes to the blinding light of desire.¹⁶ Even more fanciful is the story about the poet's desire to see Achilles in his brilliant second armour. The wish had been fulfilled in a dream, but the brilliance had left him completely blind. Others propose that the cause of his blindness was the revenge of Helen of Troy, who was unable to bear her portrayal as a *femme fatale* in Homer's works.¹⁷

Regardless, in the literature of *Lives of Homer*, we are confronted with important everyday details about blindness that are rare and often widely dispersed throughout other ancient sources: the absence and presence of guides – in many cases, children – being guided by the bleating of goats (and not by the barking of dogs), the profession of teacher/poet and an association with shoemakers, dictating sayings, appealing to a form of social welfare, being deceived, marrying and having children, possible disdain upon initial meeting and the constant struggle for life, despite material affluence through the sale of a flourishing school before blindness struck. However we may read the lives of Homer, they do not provide us with a biography of a 'super-crip' – a functionally disabled person who triumphs over all prejudices and finds his own way in life. The blindness is more likely to be noted in passing, and it is never the central topic.

¹⁴ Pseudo-Herodotus, *Life of Homer* 34–36. According to Plutarch, *Life of Homer* 1.4–5 (pp. 241–244 Allen), he did indeed die of disillusionment over the unsolved riddle.

¹⁵ Proclus, *Life of Homer* l. 16–18 (pp. 68–69 Severyns) on the traditional interpretation of the word *homēros*; l. 47–49 (p. 72 Severyns) on the impossibility of being blind. Remarkably, Proclus does not consider the detail of blindness in old age. Cicero, *Tusculan Disputations* 5.114 also considers Homer's blindness impossible for the same reasons.

¹⁶ Suda, s.v. Homer l. 15 (251 Adler). ¹⁷ Plutarch, *Life of Homer* 6, l. 45–56 (p. 252 Allen).

These works nevertheless do provide evidence of how Homer's disability brought him to the edge of destruction. It is indeed an anthropological fact, to be observed amongst African tribes down to today, that there were inspired poets who, as blind men, were considered closer to the gods and particularly revered as such.¹⁸ We should nevertheless be careful to avoid being seduced into the overly optimistic perception of blind people as the chosen ones within a society. '[A]ll these poets are blind, and they do not believe it possible for any one to become a poet otherwise . . . That at any rate . . . their poets caught from Homer, as it were from a case of sore eyes [*ophthalmia*]', remarked Dio Chrysostom in the first century AD, and not without irony.¹⁹ The ancient descriptions of the life of Homer leave no doubt: his success can be explained despite his disability, and certainly not because of it.

Material Conditions

According to data from the World Health Organization (WHO), there are currently 285 million people with visual disabilities, 39 million of whom are completely blind and 246 million of whom have low eyesight. Of those affected, 90 per cent live in developing countries, where cataracts, uncorrected myopia or hyperopia and infectious diseases are the primary causes of eye problems. The organisation distinguishes categories including 'normal vision', 'moderate visual impairment', 'severe visual impairment' and 'blindness', with the second and third categories falling under low vision. It is also possible to be considered blind for the purpose of certain regulations, even if one still has severely limited eyesight. The WHO further estimates that fewer than 1 per cent of all blind adults have had the condition since birth. In developing countries, the percentage might be higher.²⁰

What do these figures imply for the Roman Empire? Numerical comparisons are a risky proposition. The current WHO figures refer to an increasingly ageing world population (65 per cent of all people with visual disabilities are 50 years of age or older). Taking the developing countries of today as an analogy, we could expect there to have been a high number of eye diseases due to infections in antiquity: trachoma or river blindness propagated by flies and micro-organisms, deficient hygiene in general, xerophthalmia due to a lack of vitamin A in the diet, or less adequate

¹⁸ Garland (2010: 32–33). ¹⁹ Dio Chrysostom, *Orations* 36.10–11 (trans. A. Pope)

²⁰ See the World Health Organization website: <http://who.int/topics/blindness/en>.

treatment of cataracts, glaucoma and other conditions.²¹ One possible point of comparison could be the most heavily affected region in our world, according to current WHO studies. In the zone known as Afr-D, 1 per cent of the population is blind, while 3 per cent are classified as having low vision. In the same region, 0.124 per cent of children under the age of 15 years are completely blind, with the percentage for those over 50 years of age amounting to as much as 9 per cent.²² The standard estimate for the population of the Roman Empire is 50 million (although demographers disagree about nearly every figure in this respect); thus around 20,460 blind children and 450,000 blind people above the age of 50 years would be a realistic estimate.²³ The total number of blind people would amount to approximately 500,000, with the number of people with visual impairments (including blind people) reaching 1.5 million. Moreover, given that eyeglasses did not exist in antiquity, the lack of proper correction could pose a serious disability. Although ancient authors say very little about demographic-ecological factors, we occasionally read about infectious diseases that spread through armies. One example tells of flies that contaminated the eyes.²⁴

It is immediately clear to anyone consulting the ancient sources in this regard that blindness and problems of vision constitute a prime disability that attracted the attention of ancient writers. An exploratory lexical field study revealed about 150 Greek or Latin terms for blindness and/or visual impairments. Accounts of blind people in the form of extensive – often mythological – stories or peripheral comments outnumber references to other disabilities.²⁵ The abundance of terms, however, does not imply absolute vagueness. Aristotle defines the state of being blind (*tuphlos*) as the complete lack of vision. According to his classification, people who are blind in one eye do not fall into this category. In the

²¹ Just (1997: 25). On one-sided nutrition and eye problems, see Garnsey (1999: 46).

²² The countries of this zone are Benin, Equatorial Guinea, The Gambia, Ghana, Cameroon, Cape Verde, Mali, Mauritania, Niger, Nigeria, Sierra Leone, Sudan and Togo. The figures for the Afr-E zone are nearly identical. This zone consists of the Central African Republic, Congo, Ethiopia, Kenya, Tanzania and South Africa. See [http://whqlibdoc.who.int/bulletin/2004/Vol82-No11/bulletin_2004_82\(11\)_844-851.pdf](http://whqlibdoc.who.int/bulletin/2004/Vol82-No11/bulletin_2004_82(11)_844-851.pdf).

²³ It is assumed that this affects 33 per cent of the population younger than 15 years and 10 per cent of the population older than 50. See Laes (2011a: 28). See p. 23–24 for estimates on the total of the population of the Empire.

²⁴ Herodian, *Histories* 3.9.5–6 (during the siege of Hatra, more victims of disease than enemy attacks). Plutarch, *Antony* 50 counts 24,000 losses in his army, more than half due to disease.

²⁵ See www.dorienmeulenijzer.eu/vocabulary/vocabulary.htm. The study by Meulenijzer is the first thorough investigation of blindness and eye diseases in the Roman Empire. See Esser (1961) for an initial synthesis.

seventh century AD, the encyclopaedist Isidore of Seville drew exactly the same distinction for the Latin word *caecus*.²⁶ An uncertain passage by the same writer suggests a distinction between the Latin terms *caecitudo* and *caecitas*, with the former referring to temporary inflammation and the latter to complete blindness.²⁷ The vagueness in terms nevertheless carries the obvious implication that, in practice, people clearly noticed differences. '[N]ot only am I one-eyed, but also I do not see with the eye that supposedly remains, because a cataract has appeared in its pupil and my sight is impaired', claims Gemellus alias Horion from Karanis. This is not the only testimony on papyrus in which writers address their eye injuries in concrete detail.²⁸

Ancient physicians focused explicitly on eye diseases. *Ex votos* from shrines and early Christian miracle stories are in exactly the same line. Several explanations have been advanced for this type of attention on the part of ancient sources. The Graeco-Roman culture was one of visual spectacle and performance, in which the power and meaning of the gaze were of crucial importance to the ability to assess fellow humans.²⁹ The Christian miracles are strongly influenced by the miracles in the Bible, in which the healing of blind people occupies a central position. Moreover, for philosophers and thinkers, blindness constituted a prime *topos*: the disability reminds one of the importance of sensation and the hierarchy of observation.

Instead of undercutting these explanations, study of the material conditions reinforces them and places them within the proper context. Along with mobility problems, eye diseases were amongst the most prominent disabilities to confront ancient people. General human experience teaches that the sense of sight is one of the last things we would wish to lose. The following sections provide an overview of how a society coped with this fundamental human impediment.

²⁶ Aristotle, *Categories* 12 a26 and *Topics* 147 b34 (definition); *Metaphysics* 1023 a4 (no one-eyes); Isidore of Seville, *Etymologies* 10.6 (*caecus*). The philosopher Chrysippus wonders if people with cataracts should be regarded as blind, given that the possibility of sight still exists. See Simplicius, *Commentary on Aristotle's Categories* 8.401.7. See Lesky (1954: 433–434).

²⁷ Isidore of Seville, *De differentiis apparatus* 99 (Uhlfelder): *Inter caecitudinem et caecitatem hoc interest, quod caecitas ipsa tamquam viae ceritas et calamitas dicitur, caecitudo autem affectio ut lippitudo dicitur*. The passage appears in a variant of the seventh-century synonym encyclopaedia by Isidore of Seville. This distinction does not appear anywhere else.

²⁸ *P. Mich.* vi.426.18–22 (dated AD 199–200?). See also *P. Mich.* vi.425.12–13 on the same Gemellus. See Arzt-Grabner (2012: 51–52) for this and other cases.

²⁹ Rizini (1998) is a fundamental study of this important aspect of Graeco-Roman culture. See also the volume published by Fredrick (2002), and particularly the contribution by Barton (2002).

Theory and Practice of Ancient Ophthalmology

'Now the foregoing are subjects of minor importance. But there are grave and varied mishaps to which our eyes are exposed; and as these have so large a part both in the service and the amenity of life, they are to be looked after with the greatest care,' notes Celsus, upon leaving the treatment of wrinkles and other conditions in the medical section of his encyclopaedia to address a more important topic.³⁰ His description of eye diseases fills more than forty pages in a modern text edition.³¹ Less than a century later, Galen, the greatest physician from antiquity, mentions 124 eye diseases.³² In the papyri from Graeco-Roman Egypt, no speciality is documented as well as that of ophthalmology.³³

Some physicians profiled themselves as eye specialists. Cicero distinguishes doctors, surgeons and eye doctors; the oculist was also a beloved object of ridicule in the epigram tradition.³⁴ Galen tells of a certain Axius, an eye doctor (*ophthalmikos*) affiliated with the British fleet. In his capacity as a doctor, he concentrated particularly on diseases that could easily spread in such environments as the army and that could have a major impact on the functioning of this machine. In another example from Britain, we read about an eye-patch for a soldier. The list of one-eyed soldiers in antiquity contains ten cases.³⁵ Papyri and inscriptions contain several dozen examples of *ophthalmikoi* or *medici ocularii*.³⁶ Primitivus was a nineteen-year-old slave. Along with his wife, his parents know him as a respectful son and eye doctor. Another example from Rome is Phasis, who was only seventeen years old and already a *medicus ocularis*. At the other end of the spectrum, we have the eye doctor Gaius Terentius Pistus, who died at the age of eighty-seven years, five months, twenty-four days and ten hours. Along with his wife, he was honoured by two of his freed slaves.³⁷ In the context of a society that had no institutionalised educational programmes or certificates, we should not assume a clear understanding at the time of what was meant by any mention of an eye doctor. The boundaries between

³⁰ Celsus, *On Medicine* 6.6.1 (trans. W. G. Spencer).

³¹ Jackson (1996) is a basic work on ancient ophthalmology.

³² Galen, *De compositione medicamentorum secundum locos* 4.7 (12.766–777 Kühn). See Trentin (2013: 96).

³³ Andorlini Marcone (1993); Marganne (1981) and (1994).

³⁴ Cicero, *On the Orator* 3.132; Martial, *Epigrams* 8.74.

³⁵ Galen, *De compositione medicamentorum secundum locos* 4.8 (12.786 Kühn) on Axius; Birley (1992) on the eyepatch; Esser (1934) on one-eyed soldiers. *P. Oxy.* i.39 reports an eye test upon recruitment.

³⁶ See Nutton (1972). ³⁷ *AE* 1953.59 (Primitivus); *AE* 1924.106 (Phasis); *CIL* VI 6192 (Pistus).

medicine, quackery and a relatively limited technical skill were quite vague, although this is not to say that some of these physicians had not chosen to specialise in eyes and that they were not known for this.³⁸

A higher-level, philosophic-scientific tradition obviously existed for the study of the eye in antiquity. It is worth the trouble to become acquainted with it, even if such knowledge was without doubt limited to a very small minority, with little evidence of its application. Eyes were regarded as highly sensitive indicators of illness or health. For this reason, they have been the subject of precise description at least since the works of Hippocrates. As early as the fifth century BC, Alcmaeon of Croton was aware of the connection between the eyes and the brain. By dissecting cadavers in Alexandria, Herophilus of Chalcedon discovered the trail of optical nerve passages, which he was able to trace to the eye.³⁹

Several standard texts reflect ancient knowledge concerning the structure of the human eye.⁴⁰ Let us attend to the encyclopaedist Celsus:

The eyeball, then, has two external tunics, of which the outer is called by the Greeks *ceratoides* [cornea]. In that part of the eye which is white it is fairly thick; over the region of the pupil it is thin. To this tunic the under one is joined; in the middle where the pupil is, it is pierced by a small hole: around this it is thin, further out it too is thicker and is called by the Greeks *chorioides*. These two tunics whilst enclosing the contents of the eyeball, coalesce again behind it, and after becoming thinned out and fused into one, go through the space between the bones, and adhere to the membrane of the brain. Under these two tunics, at the spot where the pupil is, there is an empty space; then underneath again is the thinnest tunic, which Herophilus named *arachnoides*. At its middle the *arachnoides* is cupped, and contained in that hollow is what, from its resemblance to glass, the Greeks call *hyaloides*; it is humour, neither fluid nor thick, but as it were curdled, and upon its colour is dependent the colour of the pupil, whether black or steel-blue, since the outer tunic is quite white: but this humour is enclosed by that thin membrane which comes over it from the interior. In front of these is a drop of humour like white of egg, from which comes the faculty of seeing; it is named by the Greeks *crystalloides*. (Celsus, *On Medicine* 7.7.13, trans. W. G. Spencer)

³⁸ Jackson (1996: 2232–2236) on specialism and vague boundaries.

³⁹ Jackson (1996: 2235–2237) on the ancient anatomy of the eye. See Galen, *De locis affectis* 4.2 (8.223 Kühn) and Celsus, *On Medicine* 2.6.1–4 on eyes as indicators; Galen, *De usu partium* 11.12 (3.813 Kühn) and *De symptomatum causis* 1.2 (7.88–89 Kühn) on Herophilus.

⁴⁰ Other standard texts: Rufus, *De corporis humani partium appellationibus* 153 (p. 154 Daremberg-Ruelle); Galen, *De usu partium* 10.1–2 (3.759–769 Kühn).

What were the most important eye diseases for which patients sought solutions? Celsus mentions *aspritudo* as an inflammation of the eye, with swollen and even bloody eyes. *Lippitudo* might refer to a more serious infection.⁴¹ These terms are obviously vague, more likely to describe symptoms than they are to gauge causes, but they were grounded in ancient practice.⁴² We are aware of more than 300 *signacula oculariorum* (eye doctor stamps) from the Roman world. Nearly all of them are from the northwestern provinces of the empire. They contain a wealth of information, including the name of the chemist involved and the medicine, as well as the disease for which the eye salve was suitable.⁴³ *Lippitudo* accounts for 25 per cent of the material, with *aspritudo* accounting for 20 per cent, followed by other afflictions, including the lack of clear vision (*claritas*) for 16 per cent, *cicatrices* (damage to the cornea) and *suppuraciones* (discharge) together accounting for 15 per cent, and clouded vision (*caligo*) for 7.5 per cent.⁴⁴ In most cases, people attempted to treat themselves by searching for eye ointment, which Pliny the Elder and other authors have told us was abundantly available on the market.⁴⁵ For example, a certain Isidorus from the Egyptian settlement at Mons Claudianus asked his two sons to bring him eye salve.⁴⁶ The sharp tirades of Celsus and Pliny the Elder regarding unreliable charlatans hawking their dubious salves in the market for exorbitant prices should probably be read within the specific context of metropolitan Rome and Alexandria.⁴⁷ Because of the stamps, the ingredients of ancient salves are also quite familiar. One of the products used was lycium, a medicine that was used in India until the nineteenth century, and thus also imported from there to Great Britain. Its components include berberine, which had an antibiotic effect. As a substitute, the Romans also used gentian, which was less powerful than the Indian variant, but certainly not harmful.⁴⁸ We must obviously wonder about the extent to which, in the absence of comprehensive monitoring, the ingredients were combined in the proper quantities. Celsus notes that several eye diseases ultimately resolve themselves, without the intervention

⁴¹ Celsus, *On Medicine* 6.6.26–27.

⁴² Jackson (1996: 2229–2230) notes that *lippitudo* is often used to refer to eye infections or ophthalmia, while *aspritudo* is likely to refer to trachoma. It is nevertheless far from certain whether the prescriptions for other salves made similar distinctions.

⁴³ Künzl (1996: vnl. 2456–2458 and 2616–2617) offers an archaeological inventory and relates the phenomenon of the stamps to the tax system in Britannia, the two Germanias and the four Gauls.

⁴⁴ Jackson (1996: 2229–2230).

⁴⁵ Pliny the Elder, *Natural History* 34.108.

⁴⁶ *O. Claud.* 174 (second century AD).

⁴⁷ Jackson (1996: 2238).

⁴⁸ Jackson (1996: 2238–2241). See Pliny the Elder, *Natural History* 24.124–127 on lycium; *Natural History* 26.140 on gentian.

of doctors.⁴⁹ Waiting and/or relief from salves appeared to be the best choices. Surgical procedures, which were anything but risk free, were used as solutions only in extreme emergencies. Helping or causing no damage was an important basic principle for ancient therapeutic action.⁵⁰

Only in extreme circumstances did people resort to eye surgery, which required the treating physician to have a cool head and a steady hand, while demanding considerable courage and daring on the part of the patient.⁵¹ It is not surprising that physicians recommended surgical procedures only if all other resources had been exhausted.⁵² The texts nevertheless contain various examples of bold – and even successful – ophthalmological procedures. The papyri mention operations for *pterygium*, a membrane containing many tiny blood vessels that grows over the tunic of the eye. For infections or overgrowth of the cornea or pupil, operative intervention is necessary even today. The patient was positioned either lying down, with the head on a sheet, or seated in a chair, with measures taken to immobilise the head. The surgeon held open the eyelid of the eye being treated, while an assistant did the same with the other eyelid. The *pterygium* was lifted with a sharp hook and then pierced with a needle and thread. The thread was then used to lift the membrane further, allowing the scalpel to complete the task. A great deal of post-operative care was needed. For example, the injured eyelid was opened regularly, in order to prevent adhesion.⁵³ Other eye diseases that were treated surgically included fistulas in the tear ducts and *trichiasis* (deformed or ingrown eyelashes).⁵⁴ In some cases, the removal of excessive eye fluid or discharge even called for such extreme procedures as *hypospathismus* or *periscyphismus*, which involved incisions in the forehead up to the skull, in order to purge the veins of excess fluid.⁵⁵ Perhaps the most evocative, however, is the cataract operation, which Celsus describes in precise detail as especially precarious and unsuited for older people (who already had poorer eyesight) or children. The ancient physicians regarded a cataract as an accumulation of fluid under the two upper layers of the eyeball. After a three-day diet – with complete abstinence on the last day – the patient was brought into a

⁴⁹ Celsus, *On Medicine* 7 prooem. 2. ⁵⁰ van der Eijk (2004).

⁵¹ Jackson (1996: 2243–2250) is a detailed overview of ancient eye surgery.

⁵² Celsus, *On Medicine* 6.6.1. Other resources include diet, baths, compresses, salves, medicines and wine.

⁵³ Celsus, *On Medicine* 7.7.4; *P. Aberdeen* 11 and *Papyri russischer und georgischer Sammlungen* i.20 mention this procedure. See also Künzl (1996: 2614–2617) for images of instruments for ophthalmological surgery.

⁵⁴ Celsus, *On Medicine* 7.7.7 (fistula); 7.7.8 (ingrown or infected eyelashes).

⁵⁵ Jackson (1996: 2247).

well-lighted room, with the face turned towards the sunlight, seated in a chair in front of the ophthalmologist, who was seated slightly higher. An assistant had the task of immobilising the patient's head, as even the slightest movement could result in permanent eye damage. The other eye was covered with wool. With a steady hand and without hesitation, the doctor then pierced the two layers of the eye with a needle, at a point precisely between the pupil and the corner of the temple, taking care not to disturb any tiny veins. When he encountered resistance, he had reached the point of accumulation. He would then push the cataract under the pupil. If it remained there, the cataract had been corrected. If not, it would be necessary to press out the accumulation with the same needle. After the procedure, a woollen cloth soaked in egg white was placed on the eye, along with other substances intended to fight infection. This procedure remained unchanged for nearly two millennia, and it is still being performed today by healers in the East. The risk of infection is usually slight, and the likelihood of successfully improved eyesight is between 40 and 50 per cent. It nevertheless goes without saying that the skill of the physician is crucial, while the patient's comfort is minimal, to say the least.⁵⁶

The rich information and the wealth of details that we have with regard to ancient ophthalmology should not blind us to an important fact. None of the ancient physicians reports the curing of congenital blindness. Such cases appear to be reserved for miracle stories. The spontaneous healing of an infection that led to de facto blindness is mentioned, although eye doctors obviously realised that certain cases were irreversible. Medicine was ultimately intended for cases that were considered treatable.⁵⁷ A man had a completely empty eye socket. When he approached Epidaurus for a cure, people ridiculed him 'for his gullibility'. He was cured and left with two eyes, if we are to believe the inscription about him.⁵⁸ 'Medicine offers no relief for these afflictions of the eye,' we read in the miracle stories of Thecla from the fifth century.⁵⁹ Congenital blindness was therefore not considered worth mentioning in medical texts – although this does not exclude the possibility that physicians regarded it as a 'special category'. Nowhere is there a better summary than in a passage by Pliny the Elder. He reports that the eyesight of many had been restored and that their blindness had disappeared after twenty years, merely through the

⁵⁶ Celsus, *On Medicine* 7.7.14. See Jackson (1996: 2247–2249).

⁵⁷ Hippocrates, *De Arte* 3 (6.5–7 Littré). ⁵⁸ Stele A 9: LiDonnici (1995: 92–93).

⁵⁹ *Life and Miracles of Thecla* 24 (p. 134 and 351; ed. Dagron). See Horn (2013: 132–133).

emission of fluid from the eye. Others had been blind from birth, even though no trace of defect could be seen in their eyes.⁶⁰

Ancient Authors on the Causes of Blindness

Blindness is the subject of many side remarks made by ancient authors. This varied palette of ancient contemplations contains an amalgam of views: scientific-medical, popular-philosophical and, in many cases, realistic conclusions based on a great deal of common sense.

The authors were obviously familiar with congenital blindness. For example, Aristotle wonders what it means when people who have been blind from birth refer to colours. Although such statements are correct in formal linguistic terms, they are empty and sterile, as they were not preceded by any empirical observation.⁶¹

Heredity was also frequently cited as a cause. Both the Egyptian Pharaoh Pheron and the Corinthian captain Timoleon lost their eyesight in advanced age due to a disease that had previously attacked others in their families.⁶² Through concrete observation, Aristotle had learned that blind parents sometimes had blind children. An apocryphal Christian source even tells of a blind family: father, mother and son.⁶³

Just as concrete and obvious was the observation that old age would be accompanied by vision problems at the very least, leading to blindness in the worst case. Virgil's father became blind in his old age. At the end of his life, Caesar Augustus suffered from reduced eyesight in his left eye. Cassius Longinus became an influential senator at an advanced age, despite his blindness. In the year 65, the emperor Nero removed the old man from the political arena by banishing him to Sardinia. Of the third-century senator Oclatinus Adventus, who was a prefect of Rome and one of the counsellors to the emperor, it is known that he 'was unable to see due to his advanced age'.⁶⁴ Christian writers were surely aware of geriatric

⁶⁰ Pliny the Elder, *Natural History* 11.149.

⁶¹ Aristotle, *Physics* 2.1.193a7–9. Congenitally blind children are mentioned by Hippocrates, *On the Seven Months' Child* 5 (7.444–445 Littré).

⁶² Diodorus Siculus, *Library* 1.59 (Pheron); Plutarch, *Timoleon* 37 (Timoleon).

⁶³ Aristotle, *Historia Animalium* 585b–586a. See Laes (2013b: 127–128) on heredity. Gregory of Tours, *Life of Andrew* 32.

⁶⁴ Old age and eye problems or even blindness: Hippocrates, *Aphorisms* 3.31 (4.500–502 Littré); Galen, *In Hippocratis Epidemiarum librum I commentarius* 1.59 (17.1.158–159 Kühn); Celsus, *On Medicine* 2.1.22, 6.6.32 and 34. Virgil's father: Donatus, *Life of Vergil* 14. Caesar Augustus: Suetonius, *Augustus* 79. Cassius Longinus: *Digest* 1.2, 2, 51–52 and Suetonius, *Nero* 37; see De Libero (2002: 78). Adventus: Dio Cassius 79.14. Furthermore, Dio Cassius does not hold Adventus

blindness from the Old Testament. Isaac and Israel suffered from weak eyes in their old age, and Eli was even completely blind.⁶⁵

Diseases could also result in blindness, particularly if no proper treatment was offered. In this context, Celsus mentions proptosis (in which the eye is pushed out of the eye socket due to severe inflammation), phthiriasis (caused by lice in the eyebrows), cataracts and mydriasis (with dilated pupils).⁶⁶ Various authors describe epidemic afflictions resulting in serious eye diseases for a substantial portion of the population.⁶⁷

The knowledge that excessive drinking could cause serious eye damage and even blindness was not reserved to the ancient scientists. The tyrant Dion from Syracuse had been a heavy drinker from his youth. After ascending the throne, he drank for ninety days straight. He would eventually pay for his behaviour with eye damage, which prevented him from seeing daylight. According to the ophthalmologist Esser, his was the first known case in history involving eye problems due to alcohol intoxication. To Aristotle it was clear: no one should have pity on anyone who becomes blind due to alcohol abuse or any other form of immoderation. Such feelings should be reserved for those who are blind from birth or as a result of illness or injury. Sextus Clodius had worn out both of his eyes through his long friendship with Marcus Antonius, a notorious drinker. The epigrams of Martial tell us of a Phrygian drunkard: he was already blind in one eye and suffered from tearing in the other. Against the advice of his doctor, he continued to drink. For his eye, the wine was truly poison.⁶⁸

Other cases left the ancient physicians guessing. When a patient had lost the sense of sight without any external signs on the eyes, the nerves connecting them to the brain were suspected as the cause. Treatment was obviously impossible.⁶⁹ Seneca had a mentally disabled slave, Harpaste, whom he tolerated in his home as his wife's jester and darling. One day, Harpaste suddenly became blind. She did not realise it herself, and she kept asking her guide to take her somewhere else, because the

in high regard: even before his blindness, his lack of education had left him illiterate. See also Parkin (2003: 254–255); Trentin (2013: 104–106) on blindness and old age.

⁶⁵ Genesis 27.1 (Isaac); Genesis 48.10 (Israel); 1 Samuel 4.15 (Eli).

⁶⁶ Celsus, *On Medicine* 6.6.8G–9C (*proptosis*); 6.6.15 (*phthiriasis*); 6.6.35 (cataract); 6.6.37 (*mydriasis*).

⁶⁷ Thucydides 2.49 (plague in Athens); Cyprian, *On Mortality* 10; Eusebius, *History of the Church* 9.8. Cf. above n. 26 (p. 86).

⁶⁸ Scientists: Pliny the Elder, *Natural History* 23.38. On Dion: Justin, *Epitome* 21.2; Aelian, *Variae Historiae* 2.41 and 6.12; Plutarch, *Dion* 7. See Esser (1961: 12). Compassion: Aristotle, *Nicomachean Ethics* 1114 a23–29. On Sextus Clodius: Suetonius, *On Rhetors* 5. Phrygian: Martial, *Epigrams* 6.78. For an overview on alcoholism in antiquity, see Laes (2013a).

⁶⁹ Galen, *De locis affectis* 4.1 (8.218 Kühn).

house was so dark. The consul Cornelius Rufus dreamed that he had become blind. According to Pliny the Elder, he actually had lost his eyesight in his sleep.⁷⁰

The ancient physicians occasionally had something to say about psychological reasons for blindness. According to Hippocrates, this could accompany the sudden cure of intellectual illnesses, and Galen draws a connection with mania. Hysterical blindness due to a traumatic experience seems plausible in the case of Athenian Epizelus, who was unable to see after a battle, even though he had not been injured. During the fighting he had seen an enormous warrior kill the man next to him. According to ancient thought, Epizelus' blindness was related to divine intervention, thus imparting to him the status of a hero. This was thus an ancient religious explanation, which stands at a great distance from the causal explanations drawing on psychology that we know today.⁷¹

Galen observes that some people become completely blind by looking into bright sunlight. In any case, anyone daring to do so would encounter severe eye damage. In Xenophon's tale of blindness caused by reflection on the Armenian snow, we read how soldiers attempted to protect their eyes.⁷² Snow blindness also affected the soldiers of Alexander the Great in the northern highlands of Afghanistan. Eye fatigue is mentioned in the story about aged Geta, who had evaded the proscriptions by disguising himself with an eye patch. When he removed the patch after a time, his eye had become blind.⁷³

The sources also refer to causes of a more uncommon nature. Crying one's eyes out from sorrow is truly a poetic motif.⁷⁴ Cases of blindness during pregnancy or due to lightning are also documented.⁷⁵ Night blindness is also occasionally recognised by ancient physicians.⁷⁶

⁷⁰ Seneca, *Epistles* 50.2–3; Pliny the Elder, *Natural History* 7.166.

⁷¹ Hippocrates, *De crisibus* 42 (9.290 Littré); Galen, *In Hippocratis Epidemiarum librum I commentarius* 1.59 (17.1.158–159 Kühn); Herodotus, *Histories* 6.117. On the case of Epizelus, see King (2001) and (2013: 280).

⁷² Galen, *De symptomatum causis* 1.2 (7.91 Kühn). Xenophon, *Anabasis* 4.5.12–13.

⁷³ Appian, *The Civil Wars* 4.41.

⁷⁴ *The Greek Anthology* 7.389; 9.432. See Esser (1961: 24) for the poetic motif; Lesky (1954: 436) for the biblical motif. Pseudo-Quintilian, *Major Declamations* 6 is about a woman who cries herself blind due to her sorrow for her husband, who was captured by pirates. See Zinsmaier (2009) for detailed commentary on this declamation.

⁷⁵ Snow blindness: Diodorus Siculus, *Library* 17.82. Blindness during pregnancy: Aristotle, *Historia Animalium* 7.584a2–3; Pliny the Elder, *Natural History* 7.6; *The Greek Anthology* 9.46. Lightning: Nonnus, *Dionysiaca* 18.195 (on a blinded lion); Athenaeus, *Deipnosophistae* 238e. See Esser (1961: 1420).

⁷⁶ A definition of nyctalopia in Aëtius 7.48. See Lindeboom (1984); Brouzas et al. (2001). Esser (1961: 22–23) on the influence of living in the dark.

Ancient forges were dangerous places for the eyes. The same was true of glass-blowing workshops, not to mention the hazards posed to goldsmiths and ivory workers, who spent long days concentrating on minuscule objects. Varro was aware of the fatigue that could occur in the eyes. He notes that some artisans would lay black hairs under small ivory objects in order to achieve greater contrast.⁷⁷ In a healing inscription from Epidauros, we read about a bizarre accident: a certain Aeschines had climbed into a tree in order to have a better view, but he fell on a fence, thereby perforating both his eyes. Fortunately, he recovered after praying to Asclepius.⁷⁸

Self-blinding is a truly radical procedure, which ancient tradition associates with Oedipus. The Roman writers also write with admiration about the philosopher Democritus, who resorted to a similar procedure to avoid being distracted by the mundane and to concentrate his mind on that which was truly important.⁷⁹

In battle, the eyes were vulnerable points, which were targeted by opponents. In a skirmish at Dyrrachium during the civil war between Caesar and Pompey, at least four centurions from the same cohort lost their eyes. During the siege of Aquileia by Maximinus, the number of eye injuries was high. Philip II of Macedonia, Hannibal and Sertorius are but a few examples of warriors who lost their eyes in battle.⁸⁰ War veterans with eye injuries were frequently mentioned. In the *Curculio* by Plautus, we hear the main character boast about his eye, which he had lost in battle. He had actually incurred the injury in an ordinary fight at an inn, and the observers had their doubts about his version of the facts.⁸¹

Finally, we should address several grisly causes of blindness. Putting out the eyes of the opponent, even of entire armies, was a sanction commonly applied by the Byzantines. Although it avoided the sin of killing a fellow human, it did amount to the social death of a large portion of the community.⁸² The Byzantines were nevertheless not the inventors of this

⁷⁷ See Trentin (2013: 98). Juvenal, *Satires* 10.130 on the inflamed eyes of a blacksmith. Varro, *On the Latin Language* 7.1.1 on contrast effect.

⁷⁸ Stele A 11. LiDonnici (1995: 94–95).

⁷⁹ Sophocles, *Oedipus Rex* 1286–1290. On Democritus: Gellius 10.17.2; Plutarch, *On Curiosity* 507a.

⁸⁰ Caesar, *The Civil War* 3.53; *Historia Augusta (The Two Maximini)* 22. An extensive oral tradition about Philip exists (e.g. Diodorus Siculus, *Library* 16.34.5). The complete collection can be found in Samama (2013: 234–246). Cf. pp. 164–166. On Sertorius: Plutarch, *Sertorius* 4. On Hannibal: Livy 22.2.10; Polybius, *Histories* 3.79.12 (due to poor care). See also Esser (1934). See also Stele B 12 from Epidauros: Anticrates of Cnidus lost both eyes to an enemy spear in the battle. LiDonnici (1995: 108–109).

⁸¹ Plautus, *Curculio* 392–400.

⁸² Lascaratos and Marketos (1992).

penalty. A gruesome catalogue of 'mass blinding' is easily assembled. The Scythians blinded every prisoner of war; Hamilcar Barcas blinded his opponent Indortes; Vercingetorix punished rebels by amputating their ears or impaling their eyes. In the Teutoburg Forest, the Germans gouged out the eyes of the defeated Romans.⁸³ It is interesting to note that the ancient sources tend to attribute such excesses to 'foreign' peoples. A similar mechanism appears in the biographies of 'evil emperors', to whom callous or freakish behaviour was attributed. Tiberius had his daughter-in-law Agrippina flogged by an officer; the assault cost her an eye. Nero's father had struck out the eye of a senator who had spoken too freely to him. In his final struggle between life and death, the emperor Domitian attempted to scratch out the eyes of his niece's steward Stephanus with his mangled fingers. The same emperor had made a notorious blind adulator, Catullus Messalinus, famous for his malevolent character.⁸⁴ Commodus prided himself on his collection of 'one-eyes', people whose eyes had been put out on his personal order.⁸⁵ These 'monstrous emperors' had been preceded in their sadism by 'vicious' politicians in Republican times: Sulla and Catilina were involved in the mutilation of Marius Gratidianus, whose hands were torn off, whose tongue was cut out, whose ears and nose were severed, after which his eyes were gouged out.⁸⁶ It is also no coincidence that such villains as Nero and Domitian, according to their biographers, had eye problems themselves: in a manner of speaking, the evil had turned back upon the evil-doers.⁸⁷ In the same context, we observe that 'good emperors' were credited with miraculous healings of blind people. Vespasian healed a blind man at the Serapeum in Alexandria by spitting on his eyes, and an elderly blind man from Pannonia regained his sight after the emperor Hadrian had touched his eyes.⁸⁸

Nevertheless, occasional reports suggest that aggression against the eyes was relatively common. Striking out the eyes (*oculos effodere*) is something

⁸³ Herodotus, *Histories* 4. 2; Diodorus Siculus, *Library* 25.10.2; Caesar, *The Gallic War* 7.4; Florus, *Epitome* 2.30.

⁸⁴ Suetonius, *Tiberius* 34; *Nero* 5; *Domitian* 17. On the maleficent Catullus Messalinus, see Juvenal, *Satires* 4.116; Pliny the Younger, *Epistles* 4.22.5.

⁸⁵ *Historia Augusta* (*Commodus*) 10.4.

⁸⁶ Lucan, *The Civil War* 2.177–190 (extensive catalogue of cruelties); Sallust, *Histories* 1.44; Valerius Maximus, *The Deeds and Sayings of Famous Men* 9.2.1; Plutarch, *Sulla* 32.2.

⁸⁷ Suetonius, *Nero* 51; *Domitian* 18. See Trentin (2013: 102) on this aspect of the ancient biographies of emperors.

⁸⁸ Suetonius, *Vespasian* 7, Tacitus, *Histories* 4.81–82 and Dio Cassius 65.8.1–2 on Vespasian. On Hadrian: *Historia Augusta* (*Hadrian*) 25.3–4; another eye healing by Hadrian in *Historia Augusta* (*Hadrian*) 25.1–2. See Luke (2010) and Trentin (2013: 103–104).

of a standard threat in ancient comedies.⁸⁹ Even 'good emperors' are known for this. As a young man, Octavian gouged out the eyes of the praetor Quintus Gallius, who had attacked him. For his biographer Suetonius, this offered an opportunity to contrast the unbridled behaviour of the young man with the wisdom of the Augustus of later years. The Emperor Hadrian has a good reputation among most ancient writers. One day, in a rage, he had struck out the eye of one of his slaves with a reed pen. Upon regaining his composure, the emperor asked his slave how he could atone for his deed. After a long silence, the unfortunate man uttered his laconic and painful response, 'I would like to have my eye back'.⁹⁰

The principle of 'an eye for an eye, a tooth for a tooth' – the *ius talionis* or law of retaliation – has traditionally been attributed to the Babylonian legal code of Hammurabi (circa 1750 BC). In reality, however, the principle applied in many ancient legal systems. Although 'an eye for an eye' appears in the Old Testament, specialists in Jewish law question whether the principle was actually applied. With regard to ancient Greece, we read several testimonies about Zaleucus of Locri, a legislator from the sixth century BC: anyone robbing a one-eyed man of his sight was to be punished with complete blindness as well. The same penalty applied to adulterers. Plato reports that those who were excessively bent upon gaining power were to be punished by having their eyes burned out. Once again, these are but vague indications of concrete application. The Roman Twelve Tables also praised the principle of *ius talionis*. In ancient Rome, however, it was largely a part of the declamatory exercises (many of which were fictional), as they were taught in the schools of the elocution teachers. In a setting by Pseudo-Quintilian, we read of a war hero who had struck out the eyes of a prostitute. As a penalty, he chose to be blinded himself rather than undergo the other penalty, which consisted of being the woman's permanent guide. A witness noted that 'your mutilation will not bring you the honour of a war injury'.⁹¹

Closely related to the eye-for-an-eye principle is the motif of blinding as a punishment from the gods. Appearing as early as the biography of

⁸⁹ Plautus, *Aulularia* 53; *Menaechmi* 156. See Nutting (1922) for a collection of parallel passages.

⁹⁰ Suetonius, *Augustus* 27; Galen, *De proprii animi cuiuslibet affectuum dignotione et curatione* 4 (5.17–18 Kühn).

⁹¹ Lesky (1954: 438); Esser (1961: 38–41) on the *ius talionis*. Bible: Exodus 21.23–25; Leviticus 24.20; Matthew 5.38. Ancient Greece: Diodorus Siculus, *Library* 12.17 (eyes); Valerius Maximus, *The Deeds and Sayings of Famous Men* 6.5.7 (adulterer); Plato, *Gorgias* 473c. Roman tradition: Gellius 20.1.15; Pseudo-Quintilian, *Declamations* 297.

Homer, other Greek seers (e.g. Teiresias of Phineus) were blind because they had transcended their human boundaries. Teiresias was blind either because he had revealed the secrets of the gods to humans or because he had seen Athena naked. Zeus had struck Phineus blind because of his prophetic talents.⁹² In the Roman tradition, the blindness of the honourable Appius Claudius in the year 280 BC was declared a curse of the gods. To Cicero's mind, his arch-rival Clodius had not literally been struck blind for participating in the *Bona Dea* rites, which were reserved for women, having been punished with intellectual blindness instead. There is also the tale of Metellus. In a fire in 241 BC he rescued the statue of the Palladium from the temple of Vesta, losing both eyes in the process. According to Pliny the Elder, this was an example of a heroic deed with fateful consequences. Although he could not be considered unfortunate, he could not have been fortunate either. The Roman people granted him a privilege that had not been granted to anyone since the founding of the city. Whenever he went to the senate, he was brought to the senate building by chariot. Although this was truly a great and lofty privilege, he had paid for it with his eyes. Those who looked upon that which was holy would lose their eyesight. The same applied to a man who was *pontifex maximus*, who had served twice as a consul and who had even acted as a dictator. According to an ancient tradition, those who rescued the statue of the Palladium from Troy also paid with their eyes.⁹³

Blind and Visually Impaired People in Everyday Life

Dispersed Evidence

'Blind people seek a guide', writes Seneca in the letter in which he mentions the unfortunate young slave girl Harpaste. The philosopher notes this only in passing, and primarily in order to make his ideological point: 'the blind ask for a guide, while we [other people] wander without one,' thinking that we always know everything. In the best case, such a guide could be a close relative. For example, Appius Claudius had his sons take him to the senate building, where he would launch his fiery argument against Pyrrhus. The family of the Scipiones was thus named because a

⁹² Apollodorus, *Library* 3.6.7 (Teiresias); Apollonius, *Argonautica* 2.178–186 (Phineus). See Esser (1961: 100–104; 155–160).

⁹³ Livy 9.29.2 (Appius Claudius); Cicero, *On his House* 105 (Clodius); Pliny the Elder, *Natural History* 7.141; Seneca the Elder, *Controversiae* 4.2 (Metellus). On the Palladium and the blinding in connection with Ilus and Antylus, see Plutarch, *Greek and Roman Parallel Stories* 309f–310a.

blind ancestor had wandered around the forum with a staff (*scipio*).⁹⁴ Although the state-funded chariot was a special privilege that had been granted to Quintus Metellus for rescuing the statue of the Palladium, ordinary carriages were obviously an option for other gentry.⁹⁵ Those who could afford it were likely to have had their own slaves as permanent companions. Less reliable was the guidance provided by children due their lack of experience. For blind people left to fend for themselves – those who were alone, or those whose family members were working the entire day – there was only the painstaking option of wandering through the streets using a stick. Ovid notes that most people would make way in such cases.⁹⁶ Remarkably, none of the ancient sources contains any mention of guide dogs. In contrast, medieval sources often depict dogs in the company of blind people.⁹⁷ Occasionally, an author appears to be aware of the naked truth: for the blind, a certain amount of wealth was almost necessary in order to ensure some level of comfort in life.⁹⁸ A permanent, reliable guide would surely have been a part of this. According to the sobering account of Cicero:

It is said that Asclepiades, of Eretria, a philosopher of some celebrity, when he was asked what had befallen him in consequence of his blindness, replied, 'The need of the attendance of one more servant.' As extreme poverty, if necessary, may be borne, as not a few in Greece have to bear it constantly, so blindness can be easily endured, if the support of good health be not wanting. (Cicero, *Tusculan Disputations* 5.113; trans. A. P. Peabody)

A search for information on blind people in the context of working life inevitably yields remarkable examples that the ancient writers were fond of offering in their philosophical excerpts.

Græco-Roman imagery abounds with blind visionaries and poets/musicians, both in myth and in the day-to-day reality of travelling musicians.⁹⁹ Homer, Teiresias and Phineus have already been mentioned. The singer

⁹⁴ Seneca, *Epistles* 50, 3 (trans. M. Gummere); Plutarch, *Pyrrhus* 18 and Appian, *The Samnite War* 10.4–5 (Appius Claudius); Isidore of Seville, *Etymologies* 18.2.5 (Scipio).

⁹⁵ Pliny the Elder, *Natural History* 7.141 (Metellus); Valerius Maximus, *The Deeds and Sayings of Famous Men* 8.13.5 (Appius Claudius).

⁹⁶ Victorius Vitensis, *Lives* 2.17 (PL 58, 217) (slave as guide); Pseudo-Herodotus, *Life of Homer* 32–33 (children); Ovid, *Tristia* 5.6.3.

⁹⁷ Martial, *Epigrams* 14.81 does not refer to a seeing-eye dog, although some have tried to interpret the epigram as such. See Esser (1959) and De Libero (2002: 86) on the absence of such dogs in the ancient sources.

⁹⁸ Plutarch, *Pelopidas* 3.

⁹⁹ Lébtoublon (2010) for a collection of ancient myths relating to blindness, often involving poets and/or singers.

Demodocus, who visits the court of King Alcinoös in the *Odyssey*, can be added to the list.¹⁰⁰ A blind Vestal Virgin (the eldest of the House of the Vestals) is documented in the year 14 BC.¹⁰¹ Even in the Jewish world, in which physical perfection was a basic requirement for priests and other servants, there are known examples of rabbis with eye defects. 'The people were just accustomed to the sight' was the practical argument used to evade the strict theoretical principle. Blind people were certainly also tolerated as prayer leaders and interpreters of the Scriptures.¹⁰²

Philosophers held their own as teachers. Cicero tells the following about the aged Diodotus:

Diodotus, the Stoic, lived for many years in my house. What would seem almost incredible, while he cultivated philosophy much more assiduously than before his blindness, played the lyre according to Pythagorean custom, and had books read to him by night and day. The eyes were not needed for any of these pursuits. He also discharged the office of a teacher of geometry. Although it would hardly seem possible for someone without eyes, he provided oral directions to his pupils concerning where every line in their diagrams should begin and end. (Cicero, *Tusculan Disputations* 5.113; trans. A. P. Peabody)

Despite becoming blind, Oppius Chares continued his activities as a grammarian until a highly advanced age. Gnaeus Aufidius, a former praetor, spoke in the senate and wrote a history of Greece after becoming blind. In his old age, Livius Drusus continued to publish his legal writings and recommendations, despite geriatric blindness. According to Cicero, his house was filled with clients who were unable to manage their own affairs; they were being led by the blind.

The list of blind Roman politicians is considerable.¹⁰³ Their disabilities did not prevent them from continuing their activities. The aforementioned Gnaeus Aufidius continued to speak in the senate. Perhaps the most impressive example is Appius Claudius Caecus. Having become blind at an advanced age, his sons accompanied him to the senate in a carriage in the year 280 BC. 'If only I could be deaf as well, then I would not have to hear how some senators wish to make peace with Pyrrhus', was one of the

¹⁰⁰ Esser (1961: 96–104) for an extensive list of blind musicians, poets and singers. See also Garland (2010: 33–34).

¹⁰¹ Dio Cassius 54.24.

¹⁰² Examples in *B. Megillah* 24b, in which a blind person carries a torch for his guides in the dark. On the ideal of priestly perfection and its realisation in practise, see Abrams (1998: 16–70).

¹⁰³ Suetonius, *On Grammarians* 3 (Oppius Chares); Cicero, *Tusculan Disputations* 5.112 (Aufidius); Cicero, *Tusculan Disputations* 5.112 and Valerius Maximus, *The Deeds and Sayings of Famous Men* 8.7.4 (Livius Drusus).

decisive arguments with which he was able to persuade the senate not to conclude a truce.¹⁰⁴ In the Middle Ages the Venetian doge Dandolo immediately comes to the mind. After being blind for decades, he led the siege against Constantinople in 1204, presumably at the age of ninety-seven years. The ancients also had their blind warlord: Timoleon of Corinth (ca. 411–337 BC) rescued Sicily from the hands of the Carthaginians. During the battle at Mylae, his eyesight was already so poor that he realised that he would become blind. He would nevertheless lead his army to victory. Until his death, therefore, the inhabitants of Syracuse honoured him as a hero, doing tireless efforts to make him at ease in their city. Whenever they needed to make an important political decision, Timoleon was brought to the theatre in a coach, to the loud cheers of the crowds in Syracuse. His opinion was always dominant in the decision.¹⁰⁵

Ancient writers have traditionally paid attention to the other side of the coin as well: extreme poverty and harrowing circumstances. We can read stories of blind beggars from Roman times and throughout much of the Byzantine period.¹⁰⁶ The intentional mutilation – and even blinding – of slave children in order to attract more pity as beggars is mentioned explicitly on occasion, and it has been an unfortunate reality for many regions in other periods of history.¹⁰⁷ One of the finest observations on the psychology of giving alms is attributed to the Cynic philosopher Diogenes: 'Being asked why people give to beggars but not to philosophers, he said, "Because they think they may one day be lame or blind, but never expect that they will turn to philosophy."'¹⁰⁸ Just as blind beggars seem to appear in set places in the city of Rome even today, for Juvenal the Via Appia was a place where pitiful ragamuffins gathered to throw 'flattering kisses' to the chariots of the wealthy in the hope of attracting alms. A pair of beggars, one crippled and one blind, the former leaning on the latter's shoulder while simultaneously serving as a guide, or a lame and almost blind fisherman-beggar man of nearly ninety years – all are objects of ancient ridicule and satire. The satirists presumably had specific real-life examples

¹⁰⁴ Appian, *The Samnite War* 10.5. The complete series of references Appian Claudius can be found in De Libero (2002: 78 n. 21).

¹⁰⁵ Plutarch, *Timoleon* 37–38.

¹⁰⁶ See e.g. John 9.1–8 (beggar who had been born blind). Harper (2017) 170–172 mentions how late ancient Christian writers increasingly paid attention to poverty and dire circumstances.

¹⁰⁷ Seneca the Elder, *Controversiae* 10.4.2 and 7; John Chrysostom, *Sermon on the First Epistle to the Corinthians* 21.5 (p. 61, 176–179). See Parkin (2006: 71–73). For parallels in other periods, see Stone (1977: 475) for England in the seventeenth and eighteenth centuries; Boswell (1988: 113 n. 77) for China. See also Esser (1961: 108–111).

¹⁰⁸ Diogenes Laertius 6.56 (trans. R. D. Hicks)

in mind.¹⁰⁹ Theatres, bathhouses and public squares were places in which blind people assembled. They selected the best locations: upon returning from a long journey, wealthy benefactors were sure to be in a generous mood, and they hoped for a piece of the pie.¹¹⁰

Although the attention that ancient authors paid to the highest classes and their fascination with the underbelly of society may offer historians many interesting stories, it also saddles them with an important methodological problem. It is quite possible that a large proportion of blind and visually impaired people in ancient times would hardly recognise themselves in the scenarios mentioned above. The 'ordinary', 'everyday' life of the visually disabled was seldom worth mentioning. Nevertheless, comparative anthropology and an open view towards other societies and cultures can help us along the way in this regard.

The community concept has featured among the standard themes in studies of disabilities in antiquity since the work of Rose.¹¹¹ In ancient communities all individuals were expected to contribute to the best of their ability. Even those who were completely blind had an abundance of possibilities. Within a familiar environment it was quite possible to perform manual tasks: agricultural activities (e.g. milking, picking, harvesting, pruning, keeping the butter mill operating or trampling grapes), household chores and even most trades (the connection made between Homer and cobblers is no coincidence).¹¹² Blind people could even be deployed for 'industrial' activities (e.g. mining in dark shafts). But there was no requirement for naive optimism. We read that the blind manual labourer Pausicacus was not cured until he could once again earn his own living as he had previously done.¹¹³

The current ideal of mobility was also unknown to the people of the ancient world. Migration obviously occurred, and such phenomena as rural flight and the attraction of the big city were not unknown. Nevertheless, a large share of the population seldom or never left their hometowns,

¹⁰⁹ Juvenal, *Satires* 4.116–118; The Latin Anthology 9.11–13b; Lucian, *Dialogues of the Dead* 27.9.

¹¹⁰ Philostratus, *Life of Apollonius* 4.10; Martial, *Epigrams* 12.59 (*lippus* in the group of people who greet the wealthy upon their return). Cf. John 9.1–41 on the blind man in the 'fountain' of Siloam, the bath house in Jerusalem.

¹¹¹ Rose (1997a) and (2003).

¹¹² Ancient testimonies are almost non-existent, with the exception of the papyri. For example, *P. Oxy.* xii.1446.1 mentions blind people in agriculture, although Rathbone (2006: 106) asserts that several cases of blindness in the papyri were more likely to involve the desire to evade required liturgies. On keeping the butter mills turning: Herodotus, *Histories* 4.2 and Plutarch, *Whether Virtue Can Be Taught* 440a–b.

¹¹³ *Life and Miracles of Thecla* 23 (p. 348 ed. Dagron). See Horn (2013: 129).

and tourism as we know it did not exist. This also places the position of people with visual disabilities in another light. Within their familiar environments, in which there was little spatial change, they were able to develop a freedom of movement close to that of sighted people. The ancient authors obviously make little or no mention of this, with a few exceptions. After his conviction, when Socrates refused to leave Athens, he argued that throughout his entire life he had hardly ever been out of the city. A blind or crippled person from Athens would be more likely to leave than he. The comparison speaks volumes.¹¹⁴

This is obviously not to say that we should take an overly optimistic view of the situation. In ancient communities, just as in those of other periods, reduced visual capacity or the absence of sight was regarded as placing someone in a less comfortable position. Discrimination was likely. In the year 197, Gemellus Horion of Karanis lamented the fact that his neighbours, Iulius and Sotas, despised him 'because of his poor sight'. When Sotas died, a strange dispute arose, in which Iulius attempted to encircle the unfortunate Gemellus with the evil eye by outlining the contours of his land while walking around with a foetus in his hands. The Egyptian authorities reported the bizarre events. Anthropological studies have demonstrated that some village communities look for scapegoats for failed harvests or death, often blaming such calamities on people with eye defects or blindness. Might something like this have occurred in Karanis?¹¹⁵ In ancient superstitions witches also worked with their eyes; their gaze was to be feared.¹¹⁶ In Puteoli, we read that no one with an eye defect was to be allowed to serve as a gravedigger (*libitinarius*). The taboo was not limited to eye problems: 'Nor anyone with sores, nor a one-eye, nor one who is deformed, nor a cripple, nor a blind man, nor anyone who has been maimed.'¹¹⁷ Aesthetic prejudices might have played a role: an inconsolable wet nurse laments the eye affliction of the child who has been entrusted to her. It made the poor child 'ugly, indecent and shameful in appearance and physique'.¹¹⁸ In the apocryphal Acts of Philip, we read of Charitane, the daughter of Nicodeides, who suffered eye damage due to a stroke or injury. She could hardly bear the ridicule of the people around her.¹¹⁹ Plutarch

¹¹⁴ Plato, *Crito* 53a. ¹¹⁵ *P. Mich.* vi.423 and 424. See Bryen and Wypustek (2009).

¹¹⁶ Cherubini (2008).

¹¹⁷ The age category is also restricted to between twenty and fifty years. See AE 1971.88; AE 2004.421: *dum ne quis eor(um) maior ann(or)um l minorve ann(or)um xx sit neve v[at]i(us) neve luscus neve manc(us) neve clodus l neve caec[us] neve stigmat(ibus) inscript(us) sit.*

¹¹⁸ *Life and Miracles of Thecla* 24 (p. 134 and 351 ed. Dagron). See Horn (2013: 133–136).

¹¹⁹ Acts of Philip 4.4–6.

brings us back to aristocratic circles. To him, it was not appropriate to ridicule blind people, those with eye problems or those suffering from bad breath or an unclean nose. Jokes about baldness were palatable. In his argument, he might have been challenging a prevailing custom within a society accustomed to using humour that we would consider coarse, harsh and anything but politically correct.¹²⁰

Roman Law

A wealth of information on everyday situations concerning blind people is contained in the body of Roman legal writings.¹²¹ Roman jurisdiction was essentially based on cases, and special cases are likely to attract our attention. In using this evidence, however, we should remember that we do not know whom the jurists consulted or the extent to which appeals were made to the courts.

In general, we may conclude that blind people, unlike those with other disabilities, were not regarded as 'special cases' in legal situations.

Blind people had no need for guardians (*curatores*) in their legal affairs, as they were able to defend themselves. They were also perfectly capable of drafting a will: they could even invite witnesses, making an oral statement and dictating their codicils.¹²² A regulation from Justinian legislation dating from the year 521 appears to limit this possibility ('a blind man may not make a will, except with the prescription introduced by the law of my deceased father Justinian'). Upon closer examination, the prelims of the edict stipulate that, in addition to the seven witnesses who were required to be present for the drafting of any codicil, a herald was required to act as a controller (*tabularius*), ensuring that the proper witnesses were present and taking note of the codicil that was stated.¹²³ It is not clear whether blind people could serve as witnesses in the drafting of a will. No available source contains any explicit reference in this regard. Either the Roman jurists considered the impossibility of serving as a witness so self-evident that they did not consider it worthy of mention (particular

¹²⁰ Plutarch, *Quaestiones conviviales* 633b. On ancient disability humour, see Gevaert (2013).

¹²¹ The passages have been collected by Küster (1991) and, to a lesser extent, by Ducos (2010).

¹²² Paul, *Sententiae* 4.12.9 (curator); 3.4a.4 (testament).

¹²³ *Institutes of Justinian* 2.12.4 is correctly interpreted by Küster (1991: 78–83) as a continuation of classical testamentary law regarding the blind. It is also interesting to note that the Justinianic text mentions people with congenital blindness and those who became blind later: *carentes oculis seu morbo vel ita nati*.

with regard to a written will), or blind people were regarded as perfectly valid witnesses, as they were capable of hearing the oral codicil.¹²⁴

The management of their own assets and the ability to enter into a legally valid marriage were options at any rate. Only people with intellectual disabilities were excluded from such activities:

Mutes, deaf people and blind people are allowed control over their own wealth, as long as they understood what they were doing. (*Digest* 37.3.2; Ulpian)

Mutes, deaf people and blind people are held to the obligation of a dowry, as they were able to marry. (*Digest* 23.3.73 pr.; Paul)

Blind people were allowed to adopt children, and they were eligible for adoption.¹²⁵ They were also allowed to serve as tutors to minors or to women, or as guardians for people with intellectual disabilities or for boys who had attained legal majority but who had not yet reached the age of twenty-five. Nevertheless, the jurists showed understanding for cases involving *force majeure*: individuals who had become blind were able to renounce such tutorship.¹²⁶

Finally, we cite two additional examples that reflect the pronounced practicality of the Roman jurists. These cases also demonstrate the value of the literary evidence for Romans' collective conscience:

Under the second head the Edict deals with persons who are forbidden to move on behalf of others: here the praetor excludes on the ground of sex and accidental defect, he also puts a mark on persons who deserve one for bad character . . . As to accidental defect, the praetor debar a man who has lost the sight of both eyes; such a man being unable to see the magisterial badges of office and so pay them due respect. Labeo tells us that in a case where one Publilius, a blind man, father of Asprenas Nonius, wanted to make an application to the court, Brutus turned his seat round [*aversa sella*] and refused him a hearing [*destitium*]. (*Digest* 3.1.1.5; Ulpian, trans. C. H. Monro)

The implications of the expressions *destitutum* and *aversa sella* are not immediately clear. Publilius was of a very distinguished lineage; his son Asprenas Nonius became a consul in 39 BC. Did he make his argument in

¹²⁴ Blind people were never excluded as witnesses for the will in *Tituli Ulpiani* 20.7; nor in *Institutes of Justinian* 2.10.6. See Küster (1991: 110–113), who is more convinced that blind people were excluded.

¹²⁵ *Digest* 1.7.9 (Ulpian).

¹²⁶ *Digest* 26.8.16 (Paul) (blind person allowed to be a tutor); *Digest* 27.1.40 pr. (Paul) and *Codex of Justinian* 5.68.1 (possibility of revocation). *Codex of Justinian* 5.34.3, issued in 244 by the emperor Philip, appears to refer to a prohibition from the role of curator. See Küster (1991: 143–148).

the wrong direction, such that he did not approach the judge from the front? Was Brutus demonstrating his disdain by turning his back to the blind man? The anecdote is in obvious contradiction to what we read about the unrestricted opportunities that blind aristocrats had to remain politically active.¹²⁷ The jurists recognised this contradiction as well, as Ulpian continues:

However, although a blind man cannot move on any one else's behalf, still he retains his senatorial rank, and he can discharge the office of *iudex*. It may be asked whether he is able to hold magisterial offices: this point must be considered. There is an instance of a blind man bearing such an office; indeed, Appius Claudius the Blind took part in public debates, and pronounced a very harsh view in the senate in the matter of the prisoners taken in the war with Pyrrhus. However, the best rule to lay down is that such a man is at liberty to keep any magistracy which he has already begun to exercise, but is absolutely forbidden to be candidate for another; and there are plenty of precedents to confirm this view. (*Digest* 3, 1, 1, 5; Ulpian, trans. C. H. Monro)

Blind People in Opinion and Thought

'The eye is the mirror of the soul': this expression has been used so much that we regard it as a cliché. How often do we hear about lovely eyes in contemporary pop songs or seductive video clips? How many lovers have bestowed this compliment on each other? This was also quite familiar to ancient writers.¹²⁸ Moreover, the science of physiognomy was particularly popular in the time of the Roman emperors. A person's inner state was assessed according to outward characteristics. For example, in his description of the Pythagorean and miracle worker Apollonius of Tyana, Philostratus writes:

For in many cases a man's eyes reveal the secrets of his character, and in many cases there is material for forming a judgment and appraising his value in his eyebrows and cheeks, for from these features the dispositions of people can be detected by wise and scientific men, as images are seen in a looking-glass. (Philostratus, *Life of Apollonius* 2.30; trans. F. C. Conybeare)

It was also clear to ancient orators that, together with facial expression, the eyes betray the deepest emotions of our hearts.¹²⁹

¹²⁷ Gardner (1993: 156–159); Küster (1991: 156–157) on this anecdote.

¹²⁸ Quintilian, *The Education of an Orator* 11.3.75; *The Greek Anthology* 7.661; Pliny the Elder, *Natural History* 11.145; Plutarch, *Alexander* 1.3. See McCartney (1952); Esser (1961: 76–77). On the eyes and physiognomy, see the fundamental work by Rizini (1998).

¹²⁹ A Roman definition of physiognomy appears in Gellius 1.9. Rhetoric: Cicero, *On the Laws* 1.27 and *On Fate* 10. On physiognomy in Cicero, see Corbeill (1996: 31–35). On anti-physiognomy

Did this attention also apply to eye defects? The notion that 'love is blind' can also be found in the ancient literature. Those who do not understand something, whether intellectually or morally, are sometimes described as 'blind'. An individual can be blinded by wealth or anger.¹³⁰ Clever wordsmiths were obviously able to play with such clichés:

Are we not occasionally brought to insight by love and desire? It is not loving that is a disease, but not loving. If love emerges from sight, it is those who do not love who are blind. (Philostratus, *Epistles* 52)

Blindness is also the topic of several ancient sayings. 'These . . . have eyes, but see nothing,' states Psalm 115:5 in reference to the gods of the heathens. As stated by the Greek orator Demosthenes, however, in his speech against Aristogeiton, 'seeing, they see not; hearing, do not hear' was a saying in the Greek language.¹³¹ In reference to something that is extremely simple, we say that 'even a blind man could see it'.¹³² 'Through careful groping, even the blind go wisely along their way,' we read in the collection of maxims by Publilius Syrus. We also read the pregnant formulation by Horace: 'Self-love is blind.'¹³³

Was it by coincidence that the gods of wealth, fate and love – Plutus, Fortuna and Cupid, respectively – were blind in some representations?¹³⁴ The parable of the blind man and the lame man, in which the blind man takes the lame man on his back in order to be guided by him, can be found in both Greek literature and rabbinic wisdom.¹³⁵

Blind people also appear in somewhat sterile contemplations with a dubious connection to reality. In the *Learned Banqueters* by Athenaeus, the cynical philosopher Cynulcus tells of the hopeless situation that emerges in a conversation between a deaf person and a blind person: what one does not see, the other does not hear.¹³⁶ The image of the blind leading the blind, with the result that both fall into a pit, is found not only in

and disabilities: Weiler (2012). Evans (1969) remains the most complete overview on ancient physiognomy.

¹³⁰ 'Love is blind': *The Greek Anthology* 5.231. Intellectually blind: Seneca, *Epistles* 88.45. Morally blind: Seneca, *Epistles* 122.4. See Esser (1961: 137–138).

¹³¹ Demosthenes, *Orations* 25.797; trans. A. T. Murray.

¹³² Plato, *Republic* 465d and 550d; Aristophanes, *Wealth* 48; Livy 32.34.3; Boëthius, *On the Consolation of Philosophy* 3.8.

¹³³ Publilius Syrus, *Sententiae* C30; Horace, *Odes* 1.18.14. These and other sayings can be found through Otto (1890).

¹³⁴ Esser (1961: 179–181).

¹³⁵ *The Greek Anthology* 3.11; 12; 13; 13b (Hellenistic); *Sanhedrin* 91 (rabbinical). Indian and Islamic parallels to this fable exist, and its diffusion in literature was considerable. See Wallach (1943) and Bregman (1991).

¹³⁶ Athenaeus, *Deipnosophistae* 164.

the Bible.¹³⁷ Ancient authors used the combination of blindness and deafness primarily as a figure of speech, as with Appius Claudius in his speech against Pyrrhus. We know of no Helen Keller from the Graeco-Roman world. The Sceptic philosopher Sextus Empiricus mentions congenital deafness and blindness only as a theoretical possibility.¹³⁸ A Jewish tradition from late antiquity tells of the marriage proposal of a breathtakingly beautiful girl who was blind and deaf-mute from birth, in addition to being an orphan. How could she make her wishes known? The suitor had to lay the money for the engagement in her hand and then touch her breasts and embrace her. Her smile would indicate acceptance; she would express refusal by dropping the money.¹³⁹

Little or no attention is paid to the standpoints or experiences of the blind. How could the man born blind from the Gospel according to John suddenly see and recognise everything in the visual world? None of the ancient writers poses this question.¹⁴⁰ Aristotle notes that congenital blindness would be preferable to deafness: the blind are wiser in later life, as they are better able to develop concepts.¹⁴¹ With a proper sense of rhetorical exaggeration, Philostratus declares that those who are born blind are lucky, as they have never learned the ways of Eros.¹⁴² Various passages acknowledge that people becoming blind at a later age experienced sexual desire. After twenty-eight years in prison, the slaves who had been blinded by the Scythians had sex with Scythian women. The epigrams of Martial might contain a reference to a blind lover known as Asper, and Plutarch presents elderly blind men reminiscing about the pleasures of times gone by.¹⁴³ A certain degree of disability humour, in which people with functional disabilities make fun of their own disabilities, is remarkably rare in the ancient literature. One exception is offered by Cicero – a gem of irony that we cannot leave unmentioned:

¹³⁷ Matthew 15.14; Luke. 6.39; Sextus Empiricus, *Outlines of Pyrrhonism* 3, 29.

¹³⁸ Esser (1961: 29) on images for blindness and deafness. Sextus Empiricus, *Outlines of Pyrrhonism* 1.14. Seneca, *De beneficiis* 3.17.2 might refer to the combination of deafness and blindness.

¹³⁹ *Maasim* 14, pp. 140–141 (Newman). According to Hagith Sivan (email correspondence), this collection involves cases from daily life that were submitted to the judgement of the rabbis.

¹⁴⁰ John 9 (particularly 9.7–12). Mark 8.24 clearly involves a blind person who was subsequently able to see: ‘The man, who was beginning to see, replied, “I can see people; they look like trees as they walk around.”’ See Just (1997: 216; 258–270) on these passages.

¹⁴¹ Aristotle, *Parva Naturalia* 437a. The issue is frequently addressed by Lucian. See in this regard Gassino (2002).

¹⁴² Philostratus, *Epistles* 12.

¹⁴³ Herodotus, *Histories* 4.1–2; Martial, *Epigrams* 8.49; Plutarch, *Non posse suaviter vivi secundum Epicurum* 1095a.

For the reply of Antipater the Cyrenaic to some women who bewailed his being blind, though it is a little too obscene, is not without its significance. 'What do you mean?' saith he; 'do you think the night can furnish no pleasure?' (Cicero, *Tusculan Disputations* 5.112; trans. C. D. Yonge)

Christianity: Signs of Change?

Through the New Testament, blindness soon became a part of the treasury of stories of the early Christians. Jesus healed the blind Bartimaeus, who sat begging by the side of the road. He also healed a blind man in Bethsaida. At the first touch the man claimed to see people walking, who resembled trees. He could not see clearly until the second touch. A beggar who had been born blind is mentioned in the extensive healing story in the Gospel according to John, in which we also read that Jesus blamed neither the man himself nor his parents. There are also stories of the healing of two blind men sitting on the roadside.¹⁴⁴ Spiritual blindness, resulting in conversion, is known from the Acts of the Apostles. On the road to Damascus, Saul was suddenly surrounded by light from heaven. Although his companions heard the voice from heaven, they saw nothing. Nevertheless, Saul understood that it was Jesus, whose followers he was persecuting intensely. When he stood up, he could no longer see. 'For three days he was without his sight and took neither food nor drink.' His sight was restored when Ananias laid hands on him. 'It was as though scales fell away from his eyes and immediately he was able to see again. So he got up and was baptised, and after taking some food he regained his strength.' As Paul, he would shape the early church together with Peter.¹⁴⁵

In the literature of late antiquity, references to individuals with visual defects and their miraculous healing increase exponentially. In addition, we more frequently learn informative details about their daily lives. For example, Gregory of Tours tells of a two-year-old boy from Limoges. He was just beginning to say his first words and take his first steps, and he was his mother's darling (there is no mention of a father). Suddenly, there was a heavy wind. The mother did not take sufficient measures to protect her child's head. The dust penetrated his eyes, blinding him, even though

¹⁴⁴ Mark 10.46–52 (Bartimaeus) and probably Luke 18.35–43. Mark 8.22–26 (Bethsaida); John 9.1–41 (extensive account of healing); Matthew 9.27–31 and 20.29–34 (two blind men). Just (1997) addresses these and other Bible stories both theologically and sociohistorically.

¹⁴⁵ Acts 9.1–19. The passages cited from the *New Jerusalem Bible* are Acts 9.9 and 9.18–19. See Just (1997: 236–237) on Saul/Paul. In their penchant for retrospective diagnoses, physicians have obviously advanced explanations for Saul's blindness. Landsborough (1987) seeks the explanation in an epileptic seizure; Brorson and Brewer (1988) rule out this hypothesis.

he wept heavily to wash the sand from his eyes. When the boy 'was grown' (*adultus*), life amongst a roving group of beggars appeared to be the only way for him to earn a living. At that time he was fourteen years old. With the group he arrived at Tours. On Christmas Eve he remained there alone, praying in the Church of St Martin. Suddenly, it was as if someone had thrust an arrow into his eyes. They bled; he saw the candles in the church and realised that he had been healed.¹⁴⁶

Blindness and eye problems are the most frequently cited afflictions in the extensive body of miracle stories offered by Gregory of Tours. A systematic study of the rich collection of miracle stories from late antiquity and the early Middle Ages would undoubtedly be welcome. Nevertheless, the wealth of information is obviously related to the fact that these miracles followed the lines of the miracles worked by Jesus. The Old Testament tradition plays a role as well. In the book of Tobit, we read how the elderly Tobit had become blind around the age of sixty-two. He sent his son Tobias to retrieve a fortune from Media. With the help of the archangel Raphael and his wife Sarah, whom he had met along the way, Tobias succeeded in his quest. Upon his return he healed his father by rubbing gall from a fish on his eyes and peeling away the film over the eyes, starting at the corners.¹⁴⁷ The rich testimonies from the Christian sources are a logical result of the existence of the traditions of the Old and New Testaments. This obviously does not mean that there were more blind people during this period nor that their living standards had suddenly undergone substantial change.¹⁴⁸

One early Byzantine source tells of a hospital for the blind. Recent historical research has confirmed that hospitals were an invention of early Christian Constantinople. The life of St Anastasius of Persia (died in 628) refers to a woman named Photis, who became a servant in a *tuphlokomeion* – a 'hospital for the blind'. The word is documented only once in the whole of Greek literature. Is this sufficient evidence to assume that special houses appeared here and there, exclusively devoted to treating the blind?¹⁴⁹

Both St Brigit of Kildare from Ireland (453–523) and St Lucy of Syracuse (283–304) blinded themselves. When a suitor complimented

¹⁴⁶ Gregory of Tours, *Life of Martin* 3.16. See Laes (2011b: 47–48) for this and other stories about blind people in connection with Gregory of Tours.

¹⁴⁷ In particular, see Tobit 14.2 (eyes affected from sixty-two); 11.12–14 (healing). An extensive analysis of the blindness of Tobit in Just (1997).

¹⁴⁸ Just (1997) on blindness in the New Testament; Réal (2001) examines the miracle stories for Merovingian Gaul.

¹⁴⁹ In the extensive literature about the 'birth of the hospital', blindness and other disabilities are not addressed further. See Miller (2003) and Crislip (2005).

Lucy on her lovely eyes, she gouged them out and sent them to him, along with the message to leave her alone. These examples of ascetic self-blinding are unlikely to have had any more influence on Christians than the outlandish story of self-mutilation by the philosopher Democritus had on the heathens.¹⁵⁰ Or did they?

Stories about martyrs and physical suffering undoubtedly played a role in early Christian education.¹⁵¹ Should we conclude from this that people had begun to regard blindness in a different manner? We know the story of Didymus the Blind (313–398). Although another source from his early childhood tells us that he had been blind from birth, he had learned to read by fumbling for letters engraved in wooden or wax tablets. He eventually became one of the greatest thinkers of his time.¹⁵² Once again, however, it would seem quite bold to posit any change based on a few examples.

Shrines and holy sites at which miracles occurred are exceptional locations for tracing possible continuity and change between heathen and Christian thought and action. The Asclepeion in Epidaurus, Greece, has produced ten inscriptions recounting the healing of eye problems. Sick visitors would spend the night in the temple of the healing god. The god would appear in their sleep, giving them advice or intervening, with immediate healing as a result.¹⁵³ In Rome at the time of the emperors, the shrine to Asclepius on the Tiber island was the most well-known place to receive healing. Eye defects were the most common afflictions here as well.¹⁵⁴ Once again inscriptions offer remarkable stories:

In those days he [the god] revealed to Gaius, a blind man, that he should go to the holy base [of the statue] and there should prostrate himself; then go from right to left and place his five fingers on the base and raise his hand and lay it on his own eyes. And he could see again clearly while the people stood by and rejoiced that glorious deeds lived again under our Emperor Antoninus. (*IGUR* I.148; trans. L. Edelstein)

In fifth-century Christian Seleucia ad Calycadnum, now known as Meriamlik in southern Turkey, the shrine to St Thecla was one of the major resorts to

¹⁵⁰ The Christian practice of self-blinding has its origins in such Bible passages as Matthew 18.9; 5.29 and Mark 9.47 on plucking out the eye that offends one. See Lesky (1954: 443–444) for additional literature.

¹⁵¹ Horn (2009b); Holman (2009).

¹⁵² Sozomenus, *Ecclesiastical History* 3.15.1–3 is the most important source on the learning process of Didymus. According to Palladius, *Lausiaca History* 4.1 he did not become blind until the age of four and never learned to read or write. His wisdom had been given to him by God (Psalms 146.8: 'the Lord gives sight to the blind'). See Laes (2008b: 87).

¹⁵³ LiDonnici (1995) is the most recent translation of and commentary on the healing headings.

¹⁵⁴ Pensabene (1980).

which people came in droves to be healed. At one point an epidemic disease that affected the eyes had erupted. Malodorous pus appeared on the eyelids, which quickly became so encrusted that they could not open. The physicians were powerless – even worse, they had become infected themselves. In her endless pity, Thecla appeared to one of the victims in a dream: all of those who were ill should come to her shrine and take a healing bath. A laboured procession of people, most with their eyes encrusted shut, struggled to the hill near the shrine to wash themselves in the holy fountain. The contrast upon their return could not have been greater. The eyes of all were open again. Festive hymns of praise were sung loudly in honour of Thecla. After four days, only a few had not been healed. Because of their lack of faith or evil living, St Thecla herself had refused their healing. They were permanently blind, in one or both eyes. The penalty of chronic blindness was imposed as if by God. In his almighty power, he had rendered the disease a social stigma, a marker of unbelief or corruption.¹⁵⁵

The question of sin, guilt and disability divided Christian scholars. With regard to the man from Siloam, who had been blind from birth, had Jesus not explained that neither the man himself nor his parents were to blame? ‘He was born blind so that the works of God might be revealed in him.’¹⁵⁶ Both Augustine and John Chrysostom emphasise the value of this statement: people who are born blind (and their parents) are no more and no less sinful than the rest of us.¹⁵⁷ As illustrated in the case study of the epidemic and the shrine of Thecla, however, a judgmental mindset was also adopted. As we shall see, this was not only the case for blindness.

It would obviously be an exaggeration to propose that Christianity brought about a change with regard to the stigmatisation or appreciation of the blind, or the prevalence of understanding for the blind, though the Thecla case points to a peculiar case where not being healed was linked to personal sin. Attitudes and mentalities are too diverse and complex for such a conclusion, in addition to being too difficult to trace in our sources. At the very most, the texts from late antiquity reveal the multiplicity of realities and opinions that existed with regard to blind people. Nevertheless, they do reveal a small part of the story. Given the scarcity of our material, we are grateful for any piece of the puzzle.

¹⁵⁵ *Life and Miracles of Thecla* 25 (pp. 352–355 ed. Dagron). See Horn (2013: 137–139).

¹⁵⁶ John 9.2–3 (*New Jerusalem Bible*).

¹⁵⁷ Augustine, *On the Gospel of John* 44.9 (PL 351713–1719, especially 1713–1714); John Chrysostom, *Sermon on John* 56.1 (p. 59, 306). See Laes (2008b: 113).

CHAPTER 4

Deaf, Mute and Deaf-Mute *A Silent Story*

The Son of Croesus

The Lydian king Croesus (ca. 595–547 BC) was said to be the wealthiest man in the world. He invented the gold coin, and he succeeded in subjecting the Greek cities in Asia Minor to his rule. He would eventually cause his own downfall by fighting the Persian Empire. Croesus quickly became a legendary figure; in many cases, it is impossible to separate the myth from reality. The stories about him were nevertheless a part of the collective consciousness until far into late antiquity. Croesus had two sons. Herodotus recounts the following about him:

Now, Croesus had two sons, one of which was defective, since he was a deaf mute¹, while the other of his contemporaries was far the first in all respects, and his name was Atys. (Herodotus, *Histories* 1.34; trans. S. Felberbaum)

The name of the unfortunate ‘disabled’ son is not even mentioned.

Croesus had dreamed that an iron spear point would be the cause of Atys’ death. He therefore ordered all weapons and sharp objects to be removed from the palace, and he forbade the boy ever to participate in a military campaign. No sooner had Atys married than a group from Mysia came to have an audience with King Croesus. Their fields had been destroyed by a monstrous wild boar. In desperation, they came to ask the king to send his son Atys to fight the beast. Remembering the premonition, Croesus refused to send his son along on the expedition. When the young man protested his father’s order, Croesus replied as follows:

Therefore because of that vision I hastened that marriage of yours and do not send you to the undertakings, in that I was keeping guard on the chance that in some way I could during my lifetime preserve you stealthily. For you

¹ The Greek word *kophos* does not necessarily refer to ‘deaf-muteness’, but the entire context of the story clearly indicates that the situation of the boy in question was characterised by an inability to speak and an inability to hear.

are in fact my one and only son inasmuch as I count the other indeed, since he's defective [in hearing],² not to be mine. (Herodotus, *Histories* 1.38; trans. S. Felberbaum)

Although the story takes place in a Lydian setting, it is Greek through and through: fate cannot be avoided. Croesus was persuaded by his son ('but of a boar, what kind of hands are there, and what kind of iron spear, of which you are afraid', trans. S. Felberbaum) Atys departed and was killed by the sword of Adrastus, a 'damned' companion, who missed the boar, striking his companion dead. For two whole years Croesus mourned his son, whom he missed every day. Thereafter, he embarked upon his expedition against the Persians, which would come to a fatal end. In 547 BC, the Persian troops entered the Lydian capital of Sardis. Completely dazed, Croesus waited for an enemy soldier to run him through.

When the wall, then, was captured, since one of the Persians, taking Croesus for another, approached with the intention of killing him, now, Croesus saw him advance and under the influence of the present misfortune cared not; it even made no difference to him to be struck and die; but that dumb son, after he had seen the Persian advance, under the influence of fear and evil let out an utterance and said, 'O fellow human being, don't kill Croesus.' He, then, first gave voice to that, and after that from then on he could speak his whole lifetime. (Herodotus, *Histories* 1.85; trans. S. Felberbaum)

In the same chapter, Herodotus reports that this bizarre turn of events was also the fulfilment of a long-foreseen fate. When Croesus discovered that his son was a deaf-mute, he had left no resource untried to help the boy. He had even consulted the oracle at Delphi, which told him that on the first day on which the boy would speak, the tribulations for Croesus would have already begun.

The unfortunate king would ultimately be cast upon the funeral pyre. The wise words that he then spoke, however, and a miraculous storm that extinguished the raging flames would save him. Having learned that one cannot resist fate and that, as a human, one must know one's limits, he became an advisor to the Persian monarch Cyrus, who had once been his arch-enemy.

Anyone reading this lovely story from the perspective of disability history is inevitably left with many questions. But at the same time it is full of intriguing information. The plot illustrates how apparent neglect

² The Greek here is *diephtharmenon ten akouen*: 'damaged with regard to hearing'.

(the deaf-mute boy is not mentioned by name; he apparently does not actually count) can be combined with great parental concern and care (consulting oracles and searching for a means of relief). Even today there are cultures in which parents conceal the existence of disabled children in public, while providing them with much care in the home.³ We would nevertheless like to know more. How old was the boy? What eventually became of him? What was his actual affliction?

The Greek writer Nicolaus of Damascus, a contemporary of Emperor Augustus, recounts the tale of Croesus on the funeral pyre in a more dramatic manner. In his version, the boy pleads with his weeping father to be killed along with him:

From my birth, I have given you and myself only cause for grief. I simply could not be happy, due to the shame brought about by my muteness and the scandal that accompanied it. I was not able to speak my first words until misfortune had befallen us. The gods bestowed upon me speech only that I might lament our unhappy fate. (Nicolaus of Damascus, *Historici Graeci Minores* 1, fr. 67.64–66 ed. Dindorf)

Nicolaus of Damascus also reveals that, after these events, the boy led a ‘normal’ life: ‘Once he had spoken for the first time, he was no longer troubled by muteness. His mind was further healthy.’ In contrast to the version by Herodotus, the version by Nicolaus does not mention deafness. This is also the interpretation of most Latin authors:

[H]e was for a long time regarded as mute and tongue-tied . . . And by that effort and the force of his breath he broke the impediment and the bond upon his tongue, and spoke plainly and clearly. (Gellius 5.9.1–4; trans. J. C. Rolfe)⁴

A quite particular interpretation is offered by Seneca the Elder, according to whom the boy had been silent for five years, leaving open the question of whether he had been mute from birth. Pliny the Elder adds a completely different twist to the story: the son was only six months old, and the first words that he spoke may have been the salvation of his father, but they meant the downfall of the Lydian Empire.⁵

³ Laes (2008b: 86) for the example of Albania.

⁴ See also Cicero, *On Divination* 1.121 and Valerius Maximus, *The Deeds and Sayings of Famous Men* 5.4, ext. 6. In the Greek tradition, Diodorus Siculus, *Library* 9.33.2 also mentions only the problem of speech. In contrast, Xenophon, *Cyropaedia* 7.2.20; *Paroemiographi Graeci* 2.686 and Lucian, *Pro Imaginibus* 19 mention deafness.

⁵ Seneca the Elder, *Controversiae* 7.5.20; Pliny the Elder, *Natural History* 7.270. Allély (2009) provides a philological and anthropological discussion of the various versions of the story, as can be found in

In an attempt at retrospective diagnosis, scholars have tried to provide a medical explanation. Perhaps the boy's speechlessness was hysterical-traumatic, and the shock of seeing his father in mortal danger had brought his words back to him.⁶ Perhaps he was autistic, cloaking himself in silence?⁷ The readers of this book are already aware that such interpretations are pointless, as they are utterly unprovable. The aspect that should hold our interest is that most authors assign much greater emphasis to the oral element and the absence of speech than they do to deafness. This is not surprising within an oral culture, in which speaking in public was one of the most important established rights associated with the lives of the elite. The first task in developing a sound history of deaf-muteness in antiquity should thus be to unravel several cases from the ancient literature. In each case it must be established whether the writer is addressing muteness, deafness or the combination of both. Such a study is likely to reveal that the son of Croesus is indicative of the perspectives of many ancient authors.

Deaf-Mute, Mute, Deaf?

The Gospel of Mark contains a clear reference to deaf-muteness. In the region of the Decapolis a man was brought to Jesus. Jesus took him aside, placed his fingers in the man's ears and touched his tongue with saliva. 'And he said to him, "*Ephphatha*", that is, "Be opened." And his ears were opened, and at once the impediment of his tongue was loosened and he spoke clearly.'⁸ St Augustine provides two cases. The Church Father tells of a young man from Milan. Although he was handsome and elegant, he was deaf-mute, such that he was not able to express himself except through body language and gestures. He also recalls a farmer couple with about four children (Augustine could not remember exactly how many). Although both parents were able to speak, all of their children were completely deaf and dumb.⁹ Along with the story about the son of Croesus in the version by Herodotus, these are the only four clear instances of deaf-mute people in antiquity.

Nicolaus of Damascus, Cicero, Pliny the Elder, Valerius Maximus, Seneca the Elder, Gellius and Solinus. See also Laes (2011g: 453–455).

⁶ Poetscher (1974). ⁷ Dawson and Harvey (1986).

⁸ Mark 7.31–37 (*New Jerusalem Bible*). The Latin Vulgate version describes the man explicitly as *surdum et mutum* (7:31: 'deaf-mute'), while the Greek version refers to *kophos* ('deaf') and *mogilalos* ('hard of speaking').

⁹ Augustine, *De quantitate animae* 18.31 (PL 32.1052).

At the other end of the spectrum, we find stories referring only to the inability to speak. The Samian athlete Echeclus had never spoken a word. When he was treated unfairly during a lottery or – according to another version – unjustly robbed of a prize, he cried out his indignation in clearly articulated language.¹⁰ In the late antique *Aesop* novel, we read that the fable writer Aesop was not only proverbially ugly. His speech impediment was so severe that he could not speak. Working in the countryside was the only thing for which he was suited as a slave. He was eventually healed by the goddess Isis, who ‘cut away the rough places on his tongue, which had impeded him from speaking. Isis bestowed upon him the gift of speech and the skill to tell tales in Greek.’ The overseer in the field and the master reacted with amazement to Aesop’s miraculous healing.¹¹

Two healing inscriptions from Epidaurus also suggest the lack of speech alone. A mute boy and his father came to the temple of Asclepius. When the temple servant asked the father to make the requested sacrifice within a year, the boy replied, ‘I promise.’ A girl who could not speak encountered a serpent on her way to the shrine. In panic, she cried out for her mother and father. From that time on, she could speak.¹² These miracles have Christian counterparts. A young girl from Tours had never spoken. As a baby, she had not even cried. In desperation, her mother brought the child to the grave of St Martin. When the woman asked whether the incense smelled sweet and whether the spring water tasted good, the girl answered twice, ‘Yes, very nice,’ and she was healed.¹³

Pliny the Elder mentions ‘selective muteness’. After vomiting during a convulsion or seizure, Maecenas Melissus decided to remain silent for three years.¹⁴

In a number of other cases, deaf-muteness is counted as a reasonable possibility, although the authors emphasise only the silence. Through his grandfather, the young Quintus Pedius was related to Julia, the sister of Julius Caesar. The lad was ‘mute by nature’. He therefore proposed to the orator Messalla Corvinus that he should become a painter. Caesar Augustus consented. Quintus Pedius proved to be a talented painter, but he died at a young age. The history of Western art includes several deaf-mute painters: Hendrick Avercamp (1585–1634), also known as ‘the mute of

¹⁰ Gellius 5.9.5–6 (unfair lottery) and Valerius Maximus, *The Deeds and Sayings of Famous Men* 1.8, ext. 4.

¹¹ *Life of Aesop* 1 (mute); 7 (healing); 9–11 (amazed reactions). Cf. below p. 137.

¹² Stele A 5. See LiDonnici (1995: 88–89) about the boy. Stele C 1. See LiDonnici (1995: 116–117) about the girl.

¹³ Gregory of Tours, *Life of Martin* 2.38.

¹⁴ Pliny the Elder, *Natural History* 28.62.

Kampen', and Giovanni Ferdinando Navarrete (1526–1579), a student of Titian, who became deaf at the age of three, thus acquiring the nickname 'El Mud'. Although the similarities appear too good to be true, our own source only reports that Quintus Pedius did not speak. Another affliction (e.g. autism) cannot be ruled out.¹⁵ In May 363, the only spoils taken by the Emperor Julian from the Persian city of Maozamalcha consisted of a mute boy who could express himself perfectly with sign language and the most graceful gestures. This report most probably refers to an expensive mime, thus placing the emperor's modesty in perspective. Although the boy was probably deaf-mute, our source says nothing about deafness.¹⁶ Such silence on the part of the sources sometimes leads to bizarre stories. According to Gregory of Tours, the young Piolus was born with a cramped hand. Fever caused him to become mute at the age of fifteen. He was capable only of bellowing. To communicate, he used three wooden tablets, which he had bound together with a cord – vine dressers used the same design to chase birds out of their vineyards. One night, when he was sleeping in the basilica of St Martin, he had a nightmare. He cried out, blood flowed from his mouth and ears, and he was healed in his voice, and in his hearing – a remarkable addition by Gregory of Tours, who had made no previous mention of any hearing problem.¹⁷

Finally, in ancient literature deafness without speech problems is often regarded as one of the typical problems of old age. The complaint appears from the Old Testament (the octogenarian Barzillai, who lamented to David that he could no longer hear the voices of the singers) to the medical tracts and the unmerciful epigram tradition.¹⁸ 'What does it matter where an old man sits in a theatre?' sighs Juvenal. 'He cannot hear the horn and trumpet players. His slave must shout in his ear, so that he can know which guests have arrived and what time it is.'¹⁹ The Emperor Claudius offered the senator Lucius Sulla, whose hearing problems made it difficult to follow the debates in his old age, the option of sitting on the benches of the praetors.²⁰ In his soft voice, the emperor Heliogabalus ordered a centurion, who was hard of hearing, to execute the jurist Sabinus.

¹⁵ Pliny the Elder, *Natural History* 35.21.

¹⁶ Ammianus Marcellinus, *Res Gestae* 24.4.25–27. See den Boeft et al. (2002: 139–140) and Mary (1993).

¹⁷ Gregory of Tours, *Life of Martin* 2.26. See also *Life of Martin* 3.23. An adult man became mute and deaf after an attack of fever. Thinking that he had become insane, his brothers threw him out of the house. He spent five years as a beggar and, like Piolus, he used wooden tablets to communicate.

¹⁸ Parkin (2003: 84, 127, 154). See 2 Sam. 19.35–36 (Barzillai); Hippocrates, *Aphorisms* 3.31 (4.500–502 Litttré); Celsus, *On Medicine* 2.1.22; *The Greek Anthology* 11.74.

¹⁹ Juvenal, *Satires* 10.213–216. ²⁰ Dio Cassius 60.12.3.

The centurion understood that the emperor had ordered him to evict Sabinus from the city, which he immediately did. The soldier's hearing problems thus became the famous jurist's salvation.²¹

Medical and Demographic Explanations: Old and New

Like blindness and eye diseases, deafness and hearing disorders occur in various grades. According to the World Health Organization, 278 million people currently suffer moderate to serious disorders of one or both ears. As in the case of eye problems, material living conditions often play a decisive role: 80 per cent of deaf people or those with severe hearing impairments live in countries characterised by low or average incomes. The global ageing of the population and rising life expectancy are increasing the number of cases. Despite the considerable capability of contemporary audiology, in developing countries fewer than one out of every forty people who need a hearing aid actually has one.

It is estimated that approximately one out of every 1,000 people is born deaf. There is no reason to assume that the situation was any different in antiquity. As is the case today, we can assume that hereditary factors in isolated communities played a role. Even today, the Greek islands of Donussa and Amorgos have a relatively high number of deaf-mutes.²² Measles, meningitis, chronic ear infections, mumps and other childhood diseases could cause permanent hearing damage.²³ Based on the bone residue of a child in Dorchester, osteologists believe that they have identified a case of very early deafness, due to the absence of auditory canals.²⁴ Although the number of elderly people was obviously much lower, as in the case of eye problems, the complete lack of hearing aids and other devices providing assistance ensured that ancient patients could not resort to the types of help that Western countries are currently able to offer.²⁵

After his extensive comments on ophthalmology, Celsus devotes an entire chapter of his encyclopaedia to audiology or otology:

So much, then, for those classes of eye disease, for which medicaments are most successful; and now we pass to the ears, the use of which comes next

²¹ *Historia Augusta (Heliogabalus)* 16.2–3.

²² Sallares (1991: 235); Rose (1997b: 34); Rose (2003: 68).

²³ Scheidel (2001) on diseases in the Egyptian Fayum; Scheidel (2003) for the unhealthy living climate in Rome and other major cities; Scheidel (2013) in general on diseases and their impact on demography.

²⁴ Farwell and Molleson (1993: 29, 160 and 226).

²⁵ See www.who.int/mediacentre/factsheets/fs300/en/index.html for data on deafness today.

to eyesight as Nature's gift to us. But in the case of the ears still a somewhat greater danger; for whereas lesions of the eyes keep the mischief to themselves, inflammations and pains in the ears sometimes even serve to drive the patient to madness and death. That makes it more desirable to apply treatment at the very beginning, that there may be no opening for the greater discovering. (Celsus, *On Medicine*. 6.7.1; trans. W. G. Spencer)

What follows is a somewhat strange hodgepodge of observations and recommendations, focusing largely on symptoms, with little attention to classifications of diseases or their causes. An earache accompanied by severe headache, particularly if it was persistent, required shaving away the patient's hair after a period of fasting. Warm salves or hot compresses applied to the shaven head could possibly bring relief. The application of drops of medicine in the ear was recommended; soft wool was used to hold the liquid in the proper place in the ear. All types of oils, vegetable and fruit juices, or poppy extracts were included on the Celsus' list. Tumours and worms were removed with an ear scoop and by pouring in fluids. For removing scabs or pus from the ear, he recommended warm oil or water. Surgical removal with an ear scoop was another option.²⁶ Celsus was even aware of the phenomenon of tinnitus, or ringing in the ears, for which he also recommended the application of fluid.²⁷ To remove foreign objects or insects that had accidentally entered the ear, we read the following prescription:

Again, a plank may be arranged, having its middle supported and the ends unsupported. Upon this the patient is tied down, with the affected ear downwards, so that the ear projects beyond the end of the plank. Then the end of the plank at the patient's feet is struck with a mallet, and the ear being so jarred what is within drops out. (Celsus, *On Medicine* 6.7.9; trans. W. G. Spencer)

That the ancient practice of audiology was much less developed than ophthalmology is also apparent in the papyri. Only seven mention true ear diseases and their treatments – a meagre find in comparison to the countless references to eye problems in texts on papyrus.²⁸

Ancient physicians devote little attention to congenital deafness and muteness. This is not surprising, given that ancient medicine had little interest in complaints that appeared to be incurable. 'Anyone born deaf cannot speak,' is nothing more than a simple comment in the Hippocratic

²⁶ Celsus, *On Medicine* 6.7.1–7. For another overview of Roman otology, see Caelius Aurelianus, *Tardarum passionum* 2.65–70.

²⁷ Celsus, *On Medicine* 6.7.8.

²⁸ Mudry (2006) treats the otological papyrus texts and devotes little attention to the anatomy of the ear or to classifications of ear diseases.

Corpus. When the Hippocratic physicians did express interest in the phenomenon of the inability to speak (*aphonia*), it was more likely to involve such afflictions as hysteria, which could temporarily interrupt the ability to speak.²⁹ Aristotle also acknowledges the connection between congenital deafness and the inability to speak.³⁰ In a relatively strange passage in the Aristotelian *Problems*, we read that mute people (*eneoi*) speak through their noses, as their mouths are closed due to the lack of use of the tongue. For the same reason, deaf people (*kophoi*) also speak through their noses, as deafness and muteness are closely related.³¹ Galen also devotes only one passage to deaf-mutes: 'The Greeks identify as deaf-mute (*eneous*) anyone who is born deaf and capable of producing only unarticulated sounds.'³² The third-century Aristotelian commentator Alexander of Aphrodisias saw it as follows:

Why are those born deaf (*kophoi*) also unable to speak (*alaloi*)? Because they cannot hear, they also cannot speak or cry out. Some doctors claim that there is a connection of nerves between the ears, such that these two body parts are affected simultaneously. However, those who become deaf due to disease are not always mute. In this case, only the auditory nerve is affected. In the same way, people might lose their speech due to disease, without becoming deaf. They have only local damage to the nerves of the tongue. (Alexander of Aphrodisias, *Problems* 1.138)

As indicated by the Galenic passage and by a number of other fragments, the Greek word *eneos* was the standard term used to express deaf-muteness. Greek was not always consistent in this regard³³ (Herodotus uses *kophos*; see n. 1 p. 114), and, as late as the fourth century, Jerome struggled with the imprecise word usage in the Greek version of the gospels when preparing his own translation of the Bible:

The Greek word *kophos* is a more commonly used term, which is closer in meaning to 'deaf' than it is to 'mute'. In the Holy Scriptures, however, it is customary to use *kophos*, regardless of whether it is in reference to an individual who is deaf or one who is mute. (Jerome, *The Four Books of Commentary on the Gospel of Matthew* 1.9 (PL 26.60 A)³⁴

²⁹ Hippocrates, *De carnibus* 18 (8.608 Littré) on deaf-mutes. Gourevitch (1983) collects and discusses cases of aphonia in the Corpus Hippocraticum. See also Rose (2003: 70–71).

³⁰ Aristotle, *Historia Animalium* 4.536b3–5.

³¹ Pseudo-Aristotle, *Problems* 11.899a4–8. On these and other alienating medical scientific texts, see Laes (2011g: 460).

³² Galen, *In Hippocratis De medici officina librum commentarius* 9.47 (18.2.705 Kühn).

³³ Laes (2011g: 462–463) offers a detailed overview, with attention to the tradition of the lexicographers.

³⁴ See Matthew 9.33 and 15.31 for the use of *kophos* in the sense of someone who is mute.

Hebrew contains a similar ambiguity: *cheresh* refers to an individual who has lost the sense of hearing due to age, as well as to an individual who has never been able to hear, and who thus also has never been able to speak. Most of the provisions in the Mishnah refer to the latter category.³⁵

The Latin tradition is much clearer with regard to word usage. *Surdus* refers to deafness and *mutus* to muteness. The latter word is also associated with nasal speech and even with the bellowing of cattle, expressed in Latin with the onomatopoeic *mugire*.³⁶ The compound *surdomutus* did not appear in Latin until 1807.³⁷ Pliny the Elder fully subscribes to the Greek tradition: 'Those who have been unable to hear from their earliest childhood are also unable to speak. No one can be born deaf without also being mute.'³⁸

An overview of medical theories and practices should also contain a remarkable mention of surgery for the lack of speech, as found in Celsus:

Again the tongue in some persons is tied down from birth to the part underlying it, and on this account they cannot even speak. In such cases the extremity of the tongue is to be seized with a forceps, and the membrane under it incised, great care being taken lest the blood vessels close by are injured and bleeding causes harm. The treatment of the wound afterwards has been described above. And indeed many when the wound has healed have spoken; I have, however, known a case when, though the tongue has been undercut so that it could be protruded well beyond the teeth, nevertheless the power of speech has not followed. So it is that in the Art of Medicine even where there is a rule as to what ought to be done, yet there is no rule as to what result ensues. (Celsus, *On Medicine* 7.12.4; trans. W. G. Spencer)

Here, Celsus is describing the phenomenon of ankyloglossia, or short lingual frenulum, a condition that can cause major problems in feeding, in the development of speech and in oral hygiene.³⁹ His description is reminiscent of a passage in Cicero, which notes that many who had been unable to speak because their tongues were tied had nevertheless regained their speech by having an incision made with a scalpel.⁴⁰ Frenotomy, a

³⁵ Explicitly stated in *M. Terumot* 1.2. See Abrams (1998: 170–171).

³⁶ Nonius Marcellus, *De compendiosa doctrina* 14 (ed. Lindsay); Isidore of Seville, *Etymologies* 10.169. On howling, see the previously mentioned account of the young Piolus (cf. n. 17 p. 119). Inconsistencies such as those found in the Greek are rare in the Latin. See, however, Exodus 4.11: *Quis fecit mutum et audientem, videntem et caecum*.

³⁷ See Helfer (1991), s.v. *taubstumm*, *Taubstummer* and *Taubstummheit*.

³⁸ Pliny the Elder, *Natural History* 10.192.

³⁹ The word *ankyloglossos* first appears in Oribasius, *Medical Collections* 45.16 (167–170 ed. Raeder; *CMG* vi.2.1). See Laes (2013c: 160).

⁴⁰ Cicero, *On Divination* 2.96.

surgical procedure that consists of clipping the lingual frenulum, can indeed offer a solution in cases of ankyloglossia.

The addition of the ‘unsuccessful case’ is worthy of note. We have already seen how ‘a knot’ in the tongue is a standard expression for the inability to speak, even in the case of the deaf-mute in the New Testament. Perhaps the surgeon in the procedure being described wished to see only what he was able to see from within his own conceptual frameworks. Maybe the patient in question was actually deaf, therefore preventing the procedure from having any effect. It does not seem impossible within a context in which deaf-muteness remained largely outside scope of medicine.⁴¹

Deaf-Mutes in Roman Law

The position of deaf-mutes in Roman law can easily be summarised. Whereas blind people received full rights or capacity to act in many cases, deaf-mutes were often excluded from conducting legal actions.⁴² Almost all legal passages concern people who were deaf-mute or mute. Deafness that occurred with advancing age was regarded as much less of a legal impediment. In some cases, the formulation of the Latin does not allow any conclusions regarding whether the passage concerns deaf-mutes or all deaf and/or mute people.⁴³

One particularly intriguing fragment from the *Digest* suggests the presence of deaf and/or mute soldiers in the army:

It is established that a person who is deaf or dumb can make a military will while in the army, and before having been discharged on account of his affliction. (*Digest* 29.1.4 (Ulpian); trans. S. P. Scott)

The formulation implies that this is in reference to acquired deafness or muteness, possibly due to injury or psychological trauma. The text also suggests that discharge was not always automatic or immediate for such conditions. Perhaps some soldiers in this state continued for a while. Speech and hearing were not necessarily prerequisites for many military

⁴¹ This suggestion in Ferreri (1906b: 375–376) and Laes (2011g: 472), with reference to the metabelics of Jan Hendrik van den Berg, who for other cases (e.g. blood circulation) demonstrates that physicians often merely establish what they think that they have established according to their conceptual frameworks.

⁴² Küster (1991) is the basic work; Laes (2011g: 466–467) offers a summary of the issue.

⁴³ Lanza (1994) is a typical example of such a discussion.

manoeuvres, although they could make life in a military unit more difficult. Whether such soldiers were ever recruited can no longer be traced.⁴⁴

For deaf-mute members of the aristocracy, the verdict was clear: they could not hold office, but they were obliged to make the donations imposed upon them by the community. Obviously, they could not serve as judges.⁴⁵ It is therefore not surprising that the accounts of blind aristocrats who nevertheless had their political say have no parallel in the file of ancient deaf-mutes. The task of guardianship also implied the use of speech: it was closed to people who were deaf, mute or deaf-mute.⁴⁶ For the same reason, a deaf-mute could not make a legal will. Roman law did make a distinction in this regard:

Persons who are deaf and dumb cannot make a will, but where anyone becomes dumb or deaf through illness, or any other accident, after the will has been executed, it will still be valid. (*Digest* 28.1.6.1 [Gaius]; trans. S. P. Scott)

Upon closer examination, this means that if a perfectly healthy man who had fulfilled positions of responsibility were to have an accident that left him deaf or mute, he would have absolutely no options for making a will, if he had not already done so. It remains unclear whether the consequences were applied so strictly in practice.

In many cases, even literate and learned people lost their hearing or speech for various reasons. 'Hence relief has been afforded them by our constitution, which enables them, in certain cases and in certain modes therein specified, to make a will and other lawful dispositions.' (*Institutes of Justinian* 2.12.3; trans. J. B. Moyle)⁴⁷

Deaf-mutes were probably the most likely to pose problems in such situations. They were assigned a guardian, who was able to see to their legal affairs (and probably matters relating to their wills).⁴⁸ Under Roman law, deaf-mutes were allowed to marry and free slaves informally (formal manumission required spoken words).⁴⁹

⁴⁴ I am grateful to Benedikt Schaumlöffel (Bonn) for his suggestions on this passage.

⁴⁵ *Digest* 50.2.7.1 (Paul) on offices; *Digest* 5.1.12.2 (Paul) on judges. See also Küster (1991: 148–151).

⁴⁶ *Digest* 26.1.1.2–3 (Paul); *Digest* 26.1.17 (Paul). See Küster (1991: 135–141).

⁴⁷ For similar provisions, see *Digest* 28.1.16 pr. (Pomponius); *Codex of Justinian* 6.22.10. The emperor could also grant permission to draw up a will. See *Digest* 28, 1, 7 (Macer). See Küster (1991: 83–106) on testamentary authorisations.

⁴⁸ *Digest* 3.1.1.3–4 (Ulpian) on a *surdus*. In all probability, there was no option for filing a case autonomously, without a curator: *Digest* 3.1.1.5 (Ulpian). See Küster (1991: 154–156).

⁴⁹ *Digest* 23.3.73 pr. (Paul) on marriage; *Digest* 40.2.10 (Marcianus) on emancipation.

In a discussion in the *Digest*, deaf and mute slaves are mentioned in the same category as those who are ‘insolent, humpbacked, crooked, or affected with some skin disease’. The reason is clearly practical, involving defects (*vitia*) that would not imply any indemnification or annulment of sale. In other words, such slaves were perfectly capable of performing physical labour.⁵⁰ In cases involving the murder of a master, deaf people could not be charged with failing to provide aid. In the same way that parties with infirmities (*inbecilli*) could not move in order to offer assistance, *surdi* could not hear that anything was going wrong.⁵¹

One of the most intriguing legal passages concerning deafness and muteness comes from the *Codex of Justinian*, dating from the year 531. It involves jurisdiction over the possibility of making a legal will, with the emperor Justinian applying principles that had probably been valid for centuries. The codex distinguishes (1) congenital deaf-mutes, who had no possibility of making a will; (2) people who had become deaf-mute due to illness; these individuals could still make a will; (3) people who were born deaf, but who could speak – although he acknowledges that such situations are quite rare; and (4) people who had become deaf at a later age and those who were not deaf, but were unable to speak.⁵² Most cases appear perfectly plausible to us, and the fourth possibility could apparently even apply to autism or severe speech impediments caused by deformities of the mouth. Nevertheless, what should we think of the third possibility? The text suggests the existence of people to whom ‘the power of articulate speech has been granted . . . by nature’ and that ‘no one is absolutely deaf who hears when spoken to near the head’. Perhaps this refers to adults who had been able to hear in their early childhood and who had thus acquired some ability to speak. Alternatively, it might refer to people who had developed some ability to speak after endless efforts at lip-reading – a method about which nothing was written until the sixteenth century. In any case, these intriguing passages appear to be more than a pure fantasy of the Roman legal scholars.⁵³

The category of *cheresh*, or deaf-mute, is also frequently documented in the Jewish Mishnah and Talmud. The similarities to Roman legislation are remarkable. As noted, it is also not always clear whether the Hebrew texts are referring to deaf-mutes. Such people are impeded in the exercise of legal actions and, in some cases, placed in the same status as children.

⁵⁰ *Digest* 21.1.3–4 pr. (Gaius and Ulpian); trans. J. P. Scott. ⁵¹ *Digest* 29.5.3.8 (Ulpian).

⁵² *Codex of Justinian* 6.22.10 pr.; 6.22.10.1; 6.22.10.2–3; 6.22.10.4–5. See Laes (2011g: 464–465).

⁵³ Trans. J. B. Scott: see King (1996: 49; 88–89); Laes (2011g: 471).

Nevertheless, they were allowed to marry (albeit in a second-class form) and perform certain business actions by indicating with gestures.⁵⁴ Most importantly, the Mishnah distinguishes between deaf-muteness, deafness with the ability to speak, deaf-muteness occurring at a later age and congenital deafness accompanied by acquired speech. This is exactly the same ‘intriguing’ category that we encounter in Justinian’s legislation, although we must acknowledge that the Jewish legal scholars regard the case more as a theoretical possibility.⁵⁵

Echoes from Everyday Life

Our search for examples of people who were deaf, mute or deaf-mute has already revealed some details concerning daily life. Authors, papyrus texts and even a few inscriptions provide additional information.

Deafness was the subject of jokes, which were not always in the best of taste. For example, in the late antique joke book *Philogelos*, we read the following:

Someone with bad breath runs into a man who’s deaf. ‘Hello,’ he calls, and the deaf man yells, ‘Yaack!’ ‘Why, what did I say?’ asks the first man. ‘You didn’t speak; you farted,’ comes the answer. (*Philogelos* 233; trans. W. Berg)

A fool sits down next to a deaf guy and farts. The latter, noticing the smell, cries out in disgust. The fool remarks, ‘Hey, you can hear all right! You’re kidding me about being deaf!’ (*Philogelos* 241; trans. W. Berg)

Although the proverbial ‘deaf ears’ can be found in ancient imagery, other proverbs concerning deafness do not seem to exist.⁵⁶

Several ancient authors refer to the existence of sign language. We know that relatively refined forms of such communication systems were used for finger counting, for the gestures of orators on stage and even for contacts with traders from other linguistic regions.⁵⁷ In his account of a banquet in Armenia, Xenophon describes how his Greek soldiers tried to explain Greek feasting etiquette to Armenian boys. They did so with gestures ‘like

⁵⁴ Abrams (1998: 125–126) categorisation; (1998: 176–178) judicial acts; (1998: 184–185) of the same status as children; (1998: 186–190) marriage. For important passages, see *M. Gittin* 5.7 (conducting business) and *B. Yebamot* 112b (marriage).

⁵⁵ Gracer (2003: 197–198). On the deaf-mute who could regain the ability to speak: *M. Baba Kamma* 4.4 and *M. Gittin* 2.6.

⁵⁶ Terence, *Heautontimorumenos* 222; Curtius Rufus, *History of Alexander* 9.2.30.

⁵⁷ Sanford (1928) on finger counting and rhetoric; Michailidis-Nouaros (1990) on business contacts, as described in Herodotus, *Histories* 4.196.

those used by deaf-mutes'. Ctesias also mentions sign language for 'deaf and mute people' in the fifth century BC.⁵⁸

The most explicit testimonies about communities of deaf-mutes who used sign language are offered by St Augustine:

Have you never seen how men carry on conversations, as it were, with deaf people [*cum surdis*] by means of gesture, and how deaf people, similarly by gesture, ask questions and reply, teach and indicate their wishes, or at least most of them? Thus not only are visible things pointed out without the use of words, but also sounds, tastes and other such things. Actors, too, in the theatres often unfold and set forth whole stories by dancing simply and without using a single word. (Augustine, *De magistro* 3.5 [PL 32.1197]; trans. J. H. S. Burleigh)

Augustine offers more interesting material in this context. We have already mentioned the deaf-mute boy from Milan and the healthy couple with deaf-mute children. For the Church Father, it is possible for a deaf-mute couple to develop a system within their relationship with which they are also able to communicate with their children.⁵⁹ Anthropological research has shown how people with this disability sometimes develop their own communities through their communication, without any precisely taught sign language. Nevertheless, in small communities, where they tend to be isolated, deaf-mutes are regarded as 'backwards' and 'stupid'.⁶⁰

The papyri from Graeco-Roman Egypt reveal information about daily life in the villages. Ten texts mention individuals who were assigned the nickname *kophos*. Perhaps these names were personal descriptions that made it possible to identify people precisely. Alternatively, they might have been a form of insult or ridicule. In the village of Tebtunis, a woman lamented the fact that her mother had been assaulted by 'Patunis, also known as the deaf man [*kophos*]'. We can only speculate whether Patunis was the local village idiot, who was thought to be incapable of controlling himself, or whether the woman was stating the facts as concretely as possible in order to convince the administrator (*epistates*) of the village to rule in her favour. A petition from the fourth century concerns a matter of inheritance. Upon his death, a father had entrusted the care of his two

⁵⁸ Xenophon, *Anabasis* 4.5.33; Ctesias in *Fragmenta Graecorum Historicorum* (ed. Jacoby) 688f 45. See also Plato, *Cratylus* 422e.

⁵⁹ Augustine, *De quantitate animae* 18.31–32 (PL 32.1052–1053). Cf. p.117 n. 9. See King (1996: 113–127).

⁶⁰ Pinker (1994: 36) describes a similar development in a community in Nicaragua. On the confusion between deaf-muteness and intellectual retardation, see Rose (1996: 34); Lane (1992: 151) on Burundi.

children, both minors, to his brother Maximus. When they grew up, this Maximus refused to transfer his brother's possessions to his nephew and niece. The niece stated her complaint and noted that her brother Gennadius, whom she describes as 'deaf-mute' (*eneos*), was still living with her uncle. This letter is the only papyrus in which the Greek word *eneos* appears.⁶¹

'Dear Aulus, a mule driver recently brought a price of 20,000 sesterii. Are you amazed at such an awesome price? He was deaf! House slaves, who spent considerable time in the immediate vicinity of their masters, were known as notorious gossipers, with whom no secret was safe. This was a *topos* in ancient literature, as skilfully reflected in this epigram by Martial. Whether deaf or mute slaves actually did bring high prices on the market can obviously not be established with any certainty. The columbarium along the Appian Way holds an intriguing epitaph:

an imperial actor, from the household of Tiberius Caesar Augustus. A mute (*mutus*) and adept imitator, he was the first to imitate lawyers. (*CIL* VI 4886)

Perhaps it is actually referring to a mute (or deaf-mute) actor who had entertained the emperor Tiberius with imitations of lawyers. Alternatively, the reference might be to an exotic slave, like the boy taken as bounty in Maozamalcha by the Emperor Julian. Yet another possibility is that the adjective *mutus* refers to the fact that the actor had performed in pantomime. The brevity of the text leaves many interpretations open and offers no certainty.⁶²

The ancient sources offer little information about the day-to-day reality of those affected by deaf-muteness. Ancient education was based entirely on drill and oral imitation. It was thus also impossible for a deaf child to participate. To be sure, education – and particularly the higher forms (e.g. instruction by grammarians or rhetoricians) – was reserved for only a small percentage of the wealthy. We can imagine the dismay of such parents upon realising that it would be out of reach for their little boy. Some healing inscriptions echo their doubts and frantic attempts. The mute painter Quintus Pedius is about the only example of a minor aristocrat who attempted to make something of himself through other avenues. The majority of the population, however, worked in the countryside. People who

⁶¹ Nachtergaele (2005) has collected all testimonies for *kophos* in the papyri. See also Laes (2011g: 469–470). *P. Tebt.* ii.283.11.6–15 (Tebtunis) from 93 or 60 BC; *P. Mich.* xv.723 on Gennadius.

⁶² The most comprehensive discussion of this remarkable inscription can be found in Malavolta (1972–1985: 227).

were deaf and mute were perfectly capable of physical labour. In some respects, they were not disabled, and they were deployed within the working community as much as possible.⁶³

The Venerable Bede and the Christian Vision

More than one history of Latin literature in antiquity ends with a discussion of the life and works of the Venerable Bede (672/3–735). While the ideology of this Anglo-Saxon monk, Doctor of the Church and multifaceted scholar, who is thought never to have left his monastery in Monkwearmouth, is firmly positioned in the Middle Ages, his style appears to be quite classical.

His *Ecclesiastical History of England* contains an unusual story, which can be found in nearly every broad historical overview of the history of deaf and/or mute people.⁶⁴ It takes us back to St John of Beverly, the Bishop of Hexham in the year 685, who performed a miraculous healing.

There was, in a village not far off, a certain dumb youth (*adulescens mutus*), known to the bishop, for he often used to come into his presence to receive alms, and had never been able to speak one word. Besides, he had so much scurf and scabs on his head, that no hair ever grew on the top of it, but only some scattered hairs in a circle round about. The bishop caused this young man to be brought, and a little cottage to be made for him within the enclosure of the dwelling, in which he might reside, and receive a daily allowance from him. When one week of Lent was over, the next Sunday he caused the poor man to come in to him, and ordered him to put his tongue out of his mouth and show it him; then laying hold of his chin, he made the sign of the cross on his tongue, directing him to draw it back into his mouth and to speak. 'Pronounce some word,' said he; 'say yea,' which, in the language of the Angles, is the word of affirming and consenting, that is, yes. The youth's tongue was immediately loosed, and he said what he was ordered. The bishop, then pronouncing the names of the letters, directed him to say A; he did so, and afterwards B, which he also did. When he had named all the letters after the bishop, the latter proceeded to put syllables and words to him, which being also repeated by him, he commanded him to utter whole sentences, and he did it. Nor did he cease all that day and the next night, as long as he could keep awake, as those who were present relate, to talk something, and to express his private thoughts and will to others, which he could never do before; after the manner of the cripple, who, being healed by the Apostles Peter and John, stood up leaping, and that walked,

⁶³ The community concept is the central point of Rose (1997a) and (2003).

⁶⁴ Werner (1932: 35); Lane (1992: 67).

and went with them into the temple, walking, and skipping, and praising the Lord, rejoicing to have the use of his feet, which he had so long wanted. The bishop, rejoicing at his recovery of speech, ordered the physician to take in hand the cure of his scurfed head. He did so, and with the help of the bishop's blessing and prayers, a good head of hair grew as the flesh was healed. Thus the youth obtained a good aspect, a ready utterance, and a beautiful head of hair, whereas before he had been deformed, poor, and dumb. Thus rejoicing at his recovery, the bishop offered to keep him in his family, but he rather chose to return home. (Bede, *Ecclesiastical History* 5.2; trans. L. E. King)

This story can be read on many levels.⁶⁵ It obviously provides interesting details about the daily life of this nameless beggar, who apparently either had a home of his own or belonged to a family (to whom he would eventually return). For Bede and his readers, the story was undoubtedly 'true' in the same way that the miracles of Jesus were 'true' (the phrase 'loosening the tongue' is an explicit reference to Mark 7.35). This also explains the mention of the witnesses who were present.

Moreover, recent research suggests that, in the early Anglo-Saxon era, members of the clergy staged such healings. The 'sign of the Cross' that Bishop John made was nothing other than a conveniently executed frenotomy. They used such healings to win the loyalty of the people, who were hungry for miracles. They would distance themselves from problem cases for which they could offer no solution.⁶⁶ The funny, touching description of the learning process thus also follows the framework of ancient educational practice, in which students began by learning letters, then proceeded with words and sentences. Nevertheless, Bede's primary objective is theological. For him, Bishop John acted as a representative of Christ on earth. His 'true' miracle consisted of bringing the man to the true faith. The conversation that lasted day and night was undoubtedly about faith. The dermatological care was left to a doctor; the Jesus-like miraculous healing of the deaf-mute was reserved to St John of Beverly.

One could wonder whether it is by sheer coincidence that the richest information about deaf-muteness is to be found in Christian sources: Jerome's identification of the ambiguity of terms in the text of the Greek Bible, the detailed explanations of Augustine regarding instruction with signs, and the rich tale of the Venerable Bede. What was truly of interest to these writers was the fact that faith was passed along orally. *Fides ex auditu*

⁶⁵ An analysis according to the model of Vovelle is offered by Laes (2011c: 928–931).

⁶⁶ Pugno (2010: 143–145).

(‘faith comes through hearing’), writes Paul (Romans 10.17). The immediate implication was that deaf children were unable to come to faith and salvation. Because they were also God’s creatures, other means were necessary. This explains Augustine’s interest in sign language and the emphasis on miracles that helped such people along their way.⁶⁷ We cannot know whether these interpretations had any effect on the daily existence of deaf-mutes. It was not until the sixteenth century that schools would be established for deaf children of the aristocracy, as figures such as the Benedictine Pedro Ponce de Leon (1520–1584) began in the San Salvador monastery in Madrid. The Italian mathematician and scholar Girolamo Cardano (1501–1576) was convinced that deaf-mute people possessed intellectual capabilities, and he advocated their education. In France the Portuguese Jew Jacob Rodrigues Pereira (1715–1780) developed a sign language and taught a deaf-mute to speak.⁶⁸

A distance of more than 1,000 years separates the anonymous son of Croesus, with whom this chapter begins, and the equally nameless beggar in the home of Bishop John of Beverly. The similarities are nevertheless remarkable. In both cases, the reader is left wondering whether the stories are actually about deaf-mutes.⁶⁹ Common sense would tend to say that they are not. How could the son of Croesus have ever learned his first sentence? How could the beggar understand the bishop’s instructions? As we have seen the uncertainty is even reinforced by the sources themselves.

We are obviously unable to trace the underlying medical reality. Moreover, this ‘reality’ (which is a dubious concept on its own) is of little importance in this context. Most of our sources, which have been reproduced nearly exclusively by aristocrats, are embedded within an oral culture, in which the power of the word was of tremendous importance. It is for this reason that our writers continually emphasise the absence of speech, leaving the auditory aspect relatively underdeveloped. If we wish to know the history of most deaf and mute people in antiquity, we must be creative in laying all the pieces of the puzzle next to each other, after which we must draw upon comparative approaches and/or anthropology. The exercise is worthwhile, even if it leaves us with a silent and modest story.

⁶⁷ King (1996) is a massive doctoral dissertation on deafness in Jerome, Augustine and Bede. Exactly the same solicitude with regard to the transfer of faith in deaf people can be found in the works of authors from the Middle Ages. See Metzler (2009).

⁶⁸ Lane (1992: 71–86) on Pereira; (1992: 90–95) on Ponce de Leon.

⁶⁹ King (1996: 212) explicitly states that Bede believed that it involved a deaf-mute.

Speech Defects *Stammering History*

Demosthenes: The Symbolic Stutterer?

Few figures from antiquity speak to the imagination of people with disabilities as much as Demosthenes (385–322 BC), the greatest Athenian orator and formidable opponent of Philip and Alexander of Macedonia. The association for stutterers in the Netherlands is named Demosthenes;¹ the film *The King's Speech* (2010), about the British King George VI, contains an oblique reference to the therapy using pebbles; and nearly every book or website on the history of speech defects begins with the heroic tale of the stuttering orator who rehearsed on the beach by calling out against the surf with pebbles in his mouth.

The ancient sources, however, emphasise other aspects. In the first century AD, Plutarch wrote a biography of Demosthenes, in which victory over one's own nature and weaknesses emerge as prominent themes.²

According to Plutarch, the childhood of Demosthenes was anything but happy. At the age of seven he lost his father. The substantial fortune that he stood to inherit was stolen by his guardians. Moreover, his health was weak. Under these circumstances, he did not receive the education that would be fitting to a boy of his class.³ At the age of twenty, he argued his first case in an Athenian court. He won the case, although he would never ultimately recuperate the money that his guardians had stolen from him. Plutarch does not make any mention of a speech defect in this episode.⁴ His first appearance before the Athenian assembly was a fiasco. The young Demosthenes was ridiculed for his strange manner of speech, his far-fetched arguments and his tangled phrasing. Moreover, his voice had been weak, his speech was often unintelligible and his breathing was not well regulated.⁵ We can

¹ www.demosthenes.nl.

² A topos of ancient literature. See Wollock (1997: 42–43). This topos can be found in Cicero, *On Divination* 2.96 in connection with Demosthenes.

³ Plutarch, *Demosthenes* 4.3–4. ⁴ Plutarch, *Demosthenes* 6.1. ⁵ Plutarch, *Demosthenes* 6.3–4.

imagine that Demosthenes was not the only young man whose first performance was a painful failure. Without microphones or other technical devices to hold the attention of the Athenian people, considerable experience and training were essential. Deeply disappointed, Demosthenes fled to Piraeus, where he encountered the aged Thracian teacher Eunomus. The teacher was highly impressed by the written text of the speech. Lack of courage, insufficient physical training and nonchalance were the cause of the failure.⁶ A second encounter would have an even greater impact on Demosthenes. The actor Satyrus asked him to recite several verses from Euripides and Sophocles. Satyrus repeated the verses, but then in such a convincing and dramatic manner that Demosthenes hardly recognised them. Demosthenes had an underground room constructed. Every day, he would descend into this room for physical training and vocal exercises. He would occasionally remain there in isolation for periods of two or three months. He shaved away half of the hair on his head, so that embarrassment would keep him from establishing social contacts during that period. Plutarch reports other examples of Demosthenes' persistence. He would place pebbles in his mouth in order to correct his weak voice and his lisp.⁷ He would also recite verses and speeches while walking uphill.⁸

According to Cicero, his great Greek predecessor Demosthenes had suffered from a speech defect resembling a lisp: he had trouble pronouncing the letter of the discipline to which he had dedicated himself. With this, Cicero was referring to the letter 'r' of 'rhetoric'. The story about the pebbles appears in the same passage.⁹ The combination of pebbles and the beach, however, is not found in any single ancient text. Quintilian notes that Demosthenes had the habit of retreating to the beach, using the crashing of the waves to simulate the commotion in the courts¹⁰ (neither the Greeks nor the Romans were accustomed to going to the beach for recreation). Moreover, none of the texts mentions that Demosthenes was a stutterer; the ancient authors do not grasp an obvious opportunity to point to such speech defect. Both Plutarch and Aeschines (a contemporary and opponent of Demosthenes) write that, in his childhood, Demosthenes had borne the nickname Batalus. (Battus was a well-known stutterer from ancient legends.) For sure, ancient authors, who tended to be fond of

⁶ Plutarch, *Demosthenes* 6.5.

⁷ Plutarch, *Demosthenes* 7. In reference to lisping, Plutarch uses the word *traulotès*.

⁸ Plutarch, *Demosthenes* 11.1.

⁹ Cicero, *On the Orator* 1.260 (letter 'r' and pebbles; the word used for lisping in this context is *balbus*); Cicero, *On Divination* 2.46 (letter 'r').

¹⁰ Quintilian, *The Education of an Orator* 10.3.30.

plays on words, would have hardly missed the opportunity to draw a connection to a stuttering problem, if such a problem had existed at all.¹¹

Upon closer examination, therefore, Demosthenes – the emblematic stutterer of antiquity par excellence – appears to have suffered from a mild speech defect at most, and to have had a poor start as a young orator. He nevertheless retains his first place in an overview of speech defects in antiquity for two reasons. The way in which he has been represented has transformed him into an icon – a man who learned to triumph over his limitations. Second, the vagueness surrounding what the problem actually was (lisp, weak voice, garbled speech) is symptomatic of the confusion and uncertainty that we encounter in many ancient texts with regard to speech. In other words, we have opened this chapter with a well-known stutterer, in order to establish that, according to the ancient authors, he had not actually been a stutterer. Demosthenes is clearly not the only case where uncertainty reigns. It is precisely for this reason that he symbolises so well the dossier of the speech-impaired in antiquity.

Causes of Speech Defects: Antiquity and Now

A speech defect is a broad term that can cover a vast array of causes. Although the World Health Organization does not dedicate a separate Fact Sheet to this topic, the issue is mentioned in many of the organisation's reports, including those on intellectual problems, behavioural disorders and neurological conditions.

Various associations (e.g. the Stuttering Foundation of America) note that stuttering – which is obviously but one of an extensive series of speech defects – affects about 1 per cent of the entire world population. This means that 687 million people in the world stutter. Although reactions to stuttering can be culturally determined, there is apparently no connection between race, background or language and the speech defect, which appears to be distributed roughly equally across the entire world, and which appears to have a neurological basis.¹²

Speech defects in the broadest sense can be related to anatomical causes. Adults with cleft palates existed in antiquity as well, as long as the condition was not so severe as to have interfered with their ability to profit

¹¹ Plutarch, *Demosthenes* 4.5; Aeschines, *Against Timarchus* 126, 131, 164. The complete file on Demosthenes' speech problem is in Laes (2013c: 173–174). See the aforementioned Holst (1926) and Cicurel and Shvarts (2003). The latter article is nevertheless marred by factual errors and assumptions that are not based on the sources.

¹² Rose (2003: 51) and Wollock (1997: 176) on figures and cultures. See also www.stutteringhelp.org.

from breastfeeding as infants. Celsus explicitly mentions split lips as the cause of a speech problem.¹³ Other anatomical factors include oxygen deficiency at birth, muscular dystrophy or spina bifida.¹⁴ Dental problems can also interfere with speech. As the jurists in the *Digests* dryly observe, 'the greater portion of mankind have lost some teeth.' They further conclude, 'He who has lost a tooth is not diseased . . . otherwise no old man would be considered healthy.' Ancient literature contains frequent associations between toothlessness and old age. Lactantius observes that old men stammer and stutter (*balbutiunt*). After losing their teeth, it is as if they have returned to childhood.¹⁵

The tongue plays a role as well. Galen tells of a patient who had accidentally bitten off the tip of his tongue. Thereafter, he suffered from speech problems.¹⁶ The macabre penalty of extracting the tongue was also known in antiquity. The martyr Romanus of Antioch was subjected to this form of torture and achieved the ultimate victory in pagan rhetorical culture: his tongue continued to talk after it had been pulled out.¹⁷

In addition to dental problems, advancing age can interfere with speech for other reasons. According to Christian tradition, during his final days in Ephesus the elderly John was carried into the church with great effort by his disciples. He had difficulty forming longer sentences. He kept repeating the words, 'Little children, love one another.'¹⁸ Cerebral haemorrhage and dementia were amongst the afflictions for which ancient authors established symptoms without extensive theorising. Experience had obviously taught them that speech disorders occurred alongside such afflictions.¹⁹

¹³ On cleft palates in antiquity, see Garland (2010: 6–7); Grmek (1983: 111); Grmek and Gourevitch (1998: 234–235) (depiction in art); Roberts and Manchester (1995) (osteology). See Galen, in Oribasius, *Liber incertus* 62.47 (171 ed. Raeder; *CMG* vi.2.2) on speech defects due to disfigured lips; Celsus, *On Medicine* 7.12.6). According to Siebers (2010: 21–23; 141) cleft palates are not perceived in all cultures as defects to be treated.

¹⁴ One possible description of infants with oxygen deficiency in Aristotle, *Historia Animalium* 587a (cf. above p. 28). Osteological material and spina bifida: Grmek (1983: 110–112); Roberts and Manchester (1995).

¹⁵ *Digest* 21.1.11 (Paul; trans. J. B. Scott). On dental problems and oral hygiene in antiquity, see Laurence (2005: 90). General: Cootjans and Gourevitch (1983) and Cootjans (1991). On old age and toothlessness, see Parkin (2003: 82–83). Lactantius, *De opificio Dei* 10.14. See also Pliny the Elder, *Natural History* 7.70. The reference to childhood relates to the etymology of 'in-fantia' – non-speaking.

¹⁶ Galen, *De morborum differentiis* 8 (6.864–866 Kühn). See also Galen, *Commentarius Prorrhethikon* 1.15 (16.510 Kühn) on the tongue and speech problems.

¹⁷ The martyrdom of Romanus is described by Prudentius, *Peristephanon* 10. See Levine (1991) and Carotenuto (2002–2003).

¹⁸ Jerome, *Commentary on the Epistle to the Galatians* 3.6.

¹⁹ Karenberg and Hort (1998) on cerebral haemorrhage; Parkin (2003: 228–235, 252) on dementia. In the case of old people who shake and stammer, Parkinson's disease should also be considered, although it was not recognised as such.

In Search of Cases

Historians in search of striking cases of people with speech defects in antiquity are faced with an intensive search through the extensive lexica of the Greek and Latin languages. The classical languages contain a broad vocabulary concerning such phenomena. *Traulos/traulizein*, *battos/battarizein*, *psellos/psellizein*, *mogilalos*, *ischnophonos* and *leptophonos* are the most obvious Greek terms. For Latin, we have *atypus*, *balbus/balbut(t)ire*, *blaesus*, *elinguis*, *haesitare lingua* and *titubare*.²⁰ Although the search is facilitated by the existence of databases, caution is advised as the terms are notoriously vague, and the context of each passage must always be taken into consideration.

In the ancient tradition, Battus (632–599 BC), the legendary founder and king of Cyrene, was symbolic of a leader with a speech defect. In any case, the Greek word *battos* refers to stuttering or stammering. Plutarch provides an explicit account of how Battus' speech defect had not stood in the way of leadership and efficacy. Another tradition even suggests that Battus had not spoken in his younger years, such that he might belong in the chapter on deaf-mutes.²¹

A satirical-burlesque tradition tells about the legendary fable writer Aesop, the hideously deformed slave purchased by his master Xanthus. In the late antique *Aesop* novel, we read that he 'had a defect even greater than his ugliness: the lack of articulate speech. He was a stutterer and could hardly talk at all.' As we have seen, he was more likely to have been completely mute.²² Also from late antiquity is the Trojan novel ascribed to Darius the Phrygian. This work mentions the lisp of both Hector and Neoptolemus.²³

In addition to Demosthenes, several other renowned Greek literary and/or political figures could be cited. The poet Pindar had 'a weak voice', which impeded his authority in directing choruses. The historian Arce-sander reports that it was as if Pindar's tongue 'was tied to itself' whenever he was obliged to act as chorus director.²⁴ We read that Alcibiades was a

²⁰ Laes (2013c: 150–152) for an analysis of the vocabulary; (2013c: 169–178) for the complete file of the cases mentioned here.

²¹ Plutarch, *On the Oracles of Delphi* 405b. Other traditions in Pausanias 10.15.6–7 and Justin, *Epitome* 13.7 (with explicit reference to the band of the tongue as *linguae nodis solutis* and *propter linguae obligationem*). See Masson (1970); Wollock (1997: 155–159) and Laes (2013c: 170–171) for the complete file.

²² *Life of Aesop* 1. Cf. above p. 118.

²³ Darius, *The History of the Destruction of Troy* 12. This novel, which refers back to Greek material, was written in Latin. The word used is *blaesus*.

²⁴ Acesander in *Fragmenta Historicorum Graecorum* (ed. Müller) iv, p. 286.

highly persuasive and charming orator, whose light lisp only made his manner of speech more attractive.²⁵ Plato was also renowned as a talented orator, even though he had been 'weak of voice' in his youth.²⁶ Charmides, another student of Socrates, was nicknamed 'the bat', due to his dark skin and shrill voice.²⁷ Isocrates remarked of himself that he lacked both the proper voice and the courage to perform as an orator. He was thus better able to manage as a teacher of eloquence.²⁸

Taken together, the Greek dossier on speech defects is rather meagre. With the exception of the legendary/satirical cases of Battus and Aesop, the sources speak only of a vague 'weakness' of voice or a peculiarity of the voice.

In the Roman tradition orators often accused their argumentative opponents of 'stammering language'. It should be self-evident that this accusation had little to do with any pathological speech defect.²⁹ Even the unclear reference to a speech defect in the young Lucius Manlius Torquatus does not yield much medical information, although the information on his residence in the countryside and the mention of the 'simple' country people and livestock do reveal some details about ancient perceptions.³⁰

Nevertheless, the Latin texts do provide some information that concerns stutterers. The pontifex Caecilius Metellus was so troubled by an 'inextricable tongue' (*inexplanatae*) that he had to rehearse for months in order to be able to pronounce the dedication of the temple of Ops Opifera. Although it is not entirely certain to which Metellus this passage refers, both Metelli who would qualify achieved the rank of consul.³¹ Perhaps the speech defect was not so severe after all. Alternatively, the Metellus in question might have managed to remedy the problem. Magistrates could avail themselves of the assistance of heralds and criers, and there was certainly no formal prohibition that would prevent people with speech defects from holding public office.³²

²⁵ Plutarch, *Alcibiades* 1.4. ²⁶ Diogenes Laërtius, *Life of Philostratus* 3.5.

²⁷ *Scholia in Aristophanem. Scholia in Nubes (scholia vetera)* (ed. Holwerda) v. 104, l. 2. About a shrill (and thus not manly) voice, see Bettini (2008a and b); Fabiano (2012).

²⁸ Isocrates, *Epistles* 8.7; *Orations* 12.10.

²⁹ Cicero, *Philippics* 3.16 reproaches Fulvius Bambalio *propter haesitantem linguam* and suggests that his name is therefore symptomatic. Pliny the Younger, *Epistles* 4.7.4–5 attacks the public prosecutor Aquilius Regulus, describing him as *haesitans lingua*.

³⁰ Livy 7.4.2–7. Cf. above p. 14–16 and 52.

³¹ It could have referred to either Lucius Caecilius Metellus Dalmaticus, consul in 119 BC, or to Lucius Caecilius Metellus, consul in 251 and 247 BC. See Morgan (1973) and Laes (2013c: 176).

³² Allély (2004a: 124).

With his second wife, Galeria Fundana, the Emperor Vitellius had a son who stammered so badly that he was nearly mute. Suetonius does not even tell us anything about the boy's name. The first son of Vitellius (Petronianus) was blind in one eye.³³

Stutterers have no prominent place in legal texts. Mild speech defects posed no obstacle to carrying out legal actions. Although we cannot always delineate sharp boundaries in this regard, the fact that Caecilius Metellus was able to serve as a magistrate suggests that he was able to state his opinions, at least under certain conditions. If the disorder completely compromised a person's intelligibility, the same measures were likely to apply as in the case of people who were mute. In this context, it need not come as a surprise that the ancient jurists did not always draw any sharp distinctions between muteness and speech defects. In the previously discussed passage on people who could hear but who could not speak, and who thus stated their wills through written announcements, the Latin expression *lingua praepedita* ('an impeded tongue') was also applied to what we would refer to as speech defects.³⁴ From the perspective of priestly purity, speech disorders accompanied by decreased hearing or any other physical defilement were regarded as sufficient reason to reject young girls between the ages of six and ten as Vestal Virgins.³⁵ For slaves stuttering posed no impediment to performing physical labour; such slaves could be regarded as 'sound'.³⁶ In one instance, a distinction is made between a speech defect and muteness:

Sabinus says that a dumb person is diseased, for it is evident that to be deprived of speech is a disease. A person who speaks with difficulty, however, is not diseased, any more than one is whom it is hard to understand; and it is clear that one whose words are without any meaning is diseased. (*Digest* 21, 1, 9; Ulpian; trans. S. P. Scott)

In the papyri references to stutterers or people with speech defects are rare. Physical features were apparently more likely to be used in the identification of individuals. From the third century, we know of a certain Ammon, who is described as 'lispering'. A fourteen-year-old runaway slave, Philippus, is described as 'having light skin, with a broad nose and difficult speech'.³⁷

The following is an intriguing inscription from Astorga in Spain:

³³ Suetonius, *Vitellius* 6. ³⁴ *Codex of Justinian* 6.22.10.5.

³⁵ Gellius 1.12.3. *Lingua debilis* might have referred to muteness, particularly in combination with the requirement on hearing.

³⁶ *Digest* 21.1.10.5 (Ulpian).

³⁷ *PSI* iii.220 (Amon, described as *traulooi*); *P. Oxy.* Li.3616 (third century AD; Philippus, described as *psellon*). See Laes (2013c: 150).

Lucius Valerius Auctus, a slave freed by Lucius, an augur, with a speech defect, 56 years of age. Felicio established this for his brother. May the earth rest lightly on him. (*CIL* II 5078; *ILS* 4960)

It seems strange that the epitaph of a seer who read the flight of birds would describe him as having suffered from a speech defect. For this reason, most epigraphists read the word *blaesus* as a proper name; the man's name was thus likely to have been Lucius Valerius Auctus Blaesus. Considering the epigraphical habits of the Romans, this appears to be by far the best explanation, although we cannot completely rule out the first option.³⁸

The Emperor's Speech: Claudius as a Stutterer

Roman history nevertheless appears to offer us a rich file on the daily life of one renowned stutterer. Since his masterful portrayal by Derek Jacobi in the 1976 BBC television series *I, Claudius*, we have known the Emperor Claudius as a stuttering man with 'spastic' features who amazed all those around him with his sharp insight and kindness. One could nevertheless wonder how Robert Graves, the author of the novel on which the series is based, came upon such an image.

The *Pumpkinification*, or *Apocolocyntosis* – the title itself reads as a tongue twister – is a political satire handed down under the name of the philosopher Seneca. The fact that the writer was not a good friend of the Emperor Claudius is apparent from the very beginning. In the first chapters, we read how the deceased Claudius makes his entrance before the gods on Mt Olympus. At first glance, his appearance was impressive, with his white hair and sturdy body. Appearances are deceptive, however, as he shook his head and limped.³⁹ When he started to speak, the gods could not understand a word. He spoke neither Greek nor Latin, but a completely unknown language of a foreign people. When he met Hercules, who had travelled over the entire world, he also could not understand a word of his babbling. To make matters worse, Hercules found that it sounded like the roar of a sea monster. He thought that it might be his thirteenth Herculean task to cope with this strange fellow.⁴⁰ For the rest, the final words that Claudius had spoken on earth had also not been

³⁸ For the discussion, see Laes (2013c: 150).

³⁹ Seneca, *Apocolocyntosis* 5.2. Suetonius, *Claudius* 30 also notes that the emperor was handsome at first sight.

⁴⁰ Seneca, *Apocolocyntosis* 5.2 (unintelligible language); 5.3 (sea monster, thirteenth work); 7.2 (Hercules frustrated that he does not understand anything).

particularly fine examples of elocution. He farted loudly and cried out, 'Oh dear, oh dear! I think I have made a mess of myself.'⁴¹ After his miserable first conversations, the deceased Claudius would ultimately have to address the gods on Mt Olympus. As a reader, we are given a portion of his speech. 'That is why I give no full report of it, for I don't want to change the words he used,' remarks the narrator mockingly. Even the deified Augustus did not hesitate to address the unfortunate Claudius on Mt Olympus firmly: '[L]et him say the three words quickly, and he may have me for a slave.'⁴²

This is obviously political satire. In order to have any effect on the readers, however, the humour of the *Apocolocyntosis* must surely have had some link to reality. This connection appears to be confirmed by the writings of Suetonius, the biographer of Claudius:

His mother Antonia often called him 'a monster of a man, not finished but merely begun by Dame Nature'; and if she accused anyone of dullness, she used to say that he was 'a bigger fool than her son Claudius'. His grandmother Augusta always treated him with the utmost contempt, very rarely speaking to him; and when she admonished him, she did so in short, harsh letters, or through messengers. When his sister Livilla heard that he would one day be emperor, she openly and loudly prayed that the Roman people might be spared so cruel and undeserved a fortune. (Suetonius, *Claudius* 3; trans. J. C. Rolfe)

Only a number of letters from his great-uncle Augustus express any concern to develop a consistent strategy for dealing with the young Claudius. At that time, Claudius was twenty-two years of age. His only public performance thus far had been the gladiatorial games that he and his brother had organised in honour of their deceased father. At that time, he had appeared on the balcony, draped in a hooded cape. Even the ceremony in which he took on the toga of manhood – the celebration of Claudius' coming of age – had been held at night.⁴³ We nevertheless read that he had been engaged twice at a very early age.⁴⁴ In his first letter, Augustus objected to the fact that Claudius had organised the priestly feast during the games of Mars; if only he had sought the support of good counsellors. In a second letter, he resolved to invite Claudius to eat with him every day during Livia's absence. Otherwise, Claudius would have eaten alone with his two friends. Augustus expressed concern over the fact that Claudius

⁴¹ Seneca, *Apocolocyntosis* 4, 3; trans. W. D. Rouse.

⁴² Seneca, *Apocolocyntosis* 7.3 (narrator's comment); 11.3 (Augustus); trans. W. D. Rouse.

⁴³ Suetonius, *Claudius* 2. ⁴⁴ Suetonius, *Claudius* 26.

should choose not just anyone, but a person whom he could 'imitate in his movements, bearing, and gait'.⁴⁵ In a third letter, he praised a speech made by the young Claudius:

How in the world anyone who is so unclear in his conversation can speak with clearness and propriety when he declaims, is more than I can see. (Suetonius, *Claudius* 4; trans. J. C. Rolfe)

At the time of Augustus' death, Claudius had served only in the priestly office of augur. When he asked his uncle, the new Emperor Tiberius, for an office, the latter was willing to grant him only the rank of former consul. Nowhere do we read that this was related to any speech defect or other disability. On the contrary, during those years, the Roman knights had twice asked Claudius to serve as their spokesman to the consuls.⁴⁶ It would not be until the year 38, when he was forty-eight years old, that Claudius would serve in the office of consul for two months, along with the emperor Caligula.⁴⁷

After he had ascended the throne in the year 41, he was able to improve his public image. As Suetonius notes, with the exception of terrible abdominal pain, he enjoyed good health from the time he became emperor. According to Tacitus, he even achieved success as an orator, as long as he had prepared his arguments well. Nevertheless, in his daily affairs, he often continued to make a ridiculous impression. He would wobble on his weak knees, laugh uncontrollably, become angry to the point of foaming at the mouth, have a runny nose, stutter (*titubantia*) and continually wag his head.⁴⁸

Ultimately, we can understand the descriptions of Claudius' voice in the satire of Seneca, the biography by Suetonius and the historical works of Tacitus only in the context of ancient rhetoric. For an orator, command of the voice was an absolute must. Eloquence required daily training. The modulation and use of the voice determined how an orator would be perceived by the demanding and often merciless audience. In the world of the Roman aristocracy, success as an orator occupied a status equivalent to that of glory on the battlefield. One's oral performance largely determined who one was.⁴⁹ To be sure, the ancient perceptions of Claudius

⁴⁵ Suetonius, *Claudius* 4; trans. J. C. Rolfe.

⁴⁶ Suetonius, *Claudius* 5–6.

⁴⁷ Suetonius, *Claudius* 7.

⁴⁸ Suetonius, *Claudius* 31 (better health); Tacitus, *Annals* 13.3 (oratorical success); Suetonius, *Claudius* 30 (ridiculous appearance).

⁴⁹ Osgood (2006–2007: 331–337) with many examples of Suetonius' remarks on the voices of the emperors. Pliny the Younger, *Panegyricus* 4.4 explicitly states that an emperor rules on land and sea with his gestures and his words.

were not particularly favourable. He was not able to control himself, and, during his reign, he allowed himself to be guided by freedmen.⁵⁰ This lack of control was evident in his voice – his *vox confusa* – which placed him on the level of a beast, or even a *monstrum*.⁵¹ Nero's ascension to the throne also marked an important step for Seneca, transforming him in one blow from a teacher-educator of a prince into a political advisor to the most powerful man of the world. In his treatise *On Anger* (*De ira*), the philosopher had already written about the control of urges and temperament. In the year 55, he dedicated his *On Benevolence* (*De clementia*) to his young imperial pupil. In all respects, his predecessor Claudius had been the opposite of what the new emperor Nero promised to become, at least according to the expectations of Seneca.⁵² History has shown that this hope would not be realised in full.

For decades, ancient historians have wondered about what had actually been the problem with Claudius. The reports of his poor health, his dull appearance and his stuttering speech stand in sharp contrast to the successes that he achieved during a stable reign of thirteen years. He was also a learned man, a connoisseur of ancient Etruscan history, and he spoke outstanding Greek. The public speaking that he had done in the senate in order to defend the inclusion of Gallic aristocrats in the ranks of senators was renowned, and it has been preserved for us on a stone from Lyon.⁵³ According to some, he suffered from spastic diplegia, or Little's Disease, either congenital or caused by brain damage at birth. This affliction is not immediately apparent at birth, but it can later cause motor problems, 'spastic' twitches, weak muscles and slowness of speech. Because of these outward phenomena, patients are often erroneously regarded as mentally retarded. Although this diagnosis is quite likely, it is relatively unimportant from the perspective of the ancient authors.⁵⁴ Once again, we must conclude that their frames of reference were quite different from our own. We tend to approach Claudius as an example of an ancient stutterer. For the ancient writers, he was the antithesis of the controlled and subdued

⁵⁰ Seneca, *Apocolocyntosis* 6.2.

⁵¹ Osgood (2006–2007: 338) on Claudius as *monstrum*. About *vox confusa*, see Seneca, *Apocolocyntosis* 5.3; Diomedes in *Grammatici Latini* 1, p. 420 (ed. Keil).

⁵² The link with *On Anger* and *On Benevolence* has already been suggested by Braund and James (1998) and further elaborated by Osgood (2006–2007).

⁵³ Suetonius, *Claudius* 41–42 on Claudius' general development. The speech of Lyon can be found in *ILS* 212 and at Tacitus, *Annals* 11.24.

⁵⁴ A well-balanced diagnosis in Gourevitch (1998: 468–470); irresponsible generalisations in Valente et al. (2002). The medical-biographical approach is strongly apparent in Levick (1990: 41–44). For overviews, see Fassolini (2006: 4144); Emberger (2012); Laes (2013c: 163–167).

Roman aristocrat, and thus unable to express himself properly in public. He was an anti-orator, hardly a person at all, and certainly not the ideal ruler at the level of a king.

Ancient Speech Therapy

The fact that ancient doctors devoted considerable attention to the organs of speech is hardly surprising. It was the use of *logos* (reason) that distinguished the rational human from the animals. For Euripides, the tongue was ‘the messenger of the *logos*’.⁵⁵ Of the large number of Pseudo-Aristotelean *Problems* on sound and speech, at least nineteen are related to difficult speech.⁵⁶ In reporting the thoughts of the mind, the tongue was guided by the brain through nerves.⁵⁷

Two matters in the ancient aetiology of speech defects are of particular interest. On the one hand, the doctrine of bodily humours was a frequently used explanatory model. It was believed that excessive moisture would soften both the nerves and the muscles of the tongue. Loss of control and poor pronunciation were the result. People who had difficulty producing ‘s’ sounds also had constitutions that were ‘too moist’: they were often troubled with diarrhoea.⁵⁸ *Trauloi* (people with lisps) and *ischnophonoi* (people with weak voices) suffered from excess gall fluid and were thus vulnerable to extreme melancholy.⁵⁹ Dryness, a secondary symptom of fever and other diseases, dries out the brain, the nerves and the tongue.⁶⁰ Extreme heat and cold could also damage these organs. A sudden stiffening of speech or rapid ‘spastic’ twitching could occur.⁶¹

On the other hand, there was a detailed explanatory model that illustrated speech impairments according to the poor functioning of one of the organs of speech. Disorders could occur in the muscles of the tongue or in the passageways (e.g. the throat or nose); the tongue could be too large, too small or even amputated; the placement of the teeth was important; the lips played a role as well. Historians of ancient medicine have distinguished

⁵⁵ Euripides, *Suppliants* 203–204.

⁵⁶ Wollock (1997: 52) lists them. See Lachenaud (2013) for a recent overview of Greek concepts of the voice.

⁵⁷ For the connection with the brain, see Galen *De usu partium* 16.3 (4.272–278 Kühn). See Wollock (1997: 23–24).

⁵⁸ Galen, *In Hippocratis Aphorismos* 6.32 (18.1.51 Kühn).

⁵⁹ Hippocrates, *Epidemics* 2.5.2 (5.128.6–7 Littré); 2.6.3 (5.132.16–17 Littré). See Wollock (1997: 274–291) for the extensive tradition on the capacity for speech and melancholy in medical theory until 1300.

⁶⁰ Hippocrates, *Epidemics* 7.43 (5.410 Littré). ⁶¹ Galen, *De sanitate tuenda* 6.2 (6.390 Kühn).

nine different explanatory models according to this framework.⁶² What is particularly interesting for our purposes is that none of these models truly addresses a specific speech impairment. They are more likely to concern idiosyncrasies of the voice or of pronunciation, emphasising the mechanical aspects without drawing any connection with the neurological aspects.

With regard to the daily existence of the majority of people with speech defects, the ancient doctors were silent. While their afflictions were likely to have given rise to mockery in the communities in which they lived, they were perfectly capable of performing physical labour, whether in the countryside or in the city.

For many young aristocrats with speech problems, the strongly rhetoric-based education is likely to have been out of reach. Quintilian advises the rapid pronunciation of tongue twisters and the involvement of stage actors in order to help children become fluent speakers.⁶³ For ancient orators, elocution and music were not far removed from one another. Ancient rhetorical performances might have seemed grotesque to our tastes, given their similarity to operettas.⁶⁴ Although it was known that singing could have beneficial effects for stutterers, the ancient rhetorician had nothing to say about such experiences.

Nevertheless, two remarkable texts could just as well have been taken directly from the practice of an ancient speech therapist.

Galen wrote an entire tract entitled *On the Voice (Peri phonès)*, which is unfortunately lost. A summary has been preserved, however, in a collection of the late antique court physician Oribasius (325–403):

A certain orator from my homeland suffered from a relatively serious form of *ischmophonia*, from which he yearned to be cured. I had observed that he had particular difficulty in the beginning of his speeches. Once he was well underway, however, even with no more than a single word, he would be able to continue his speech in an admirable fashion. I advised him to pull his chest in softly when starting a speech, thereafter driving the tension higher, if he so desired. The orator replied that I had given him excellent advice. He experienced the most problems when addressing a crowd or arguing a case, or when he was exhausted. When he was relaxed, however, he could start easily and he spoke in a perfectly normal voice. (Galen, in Oribasius, *Liber incertus* 62.33–34 [169–170 ed. Raeder; *CMG* vi.2.2])

⁶² A detailed list in Wollock (1997: 103–108); a summary in Laes (2013c: 159–160).

⁶³ Quintilian, *The Education of an Orator* 1.1.37 (tongue twisters); 1.11.1–8 (actors).

⁶⁴ Dionysius van Halicarnassus, *De compositione verborum* 11. See Wollock (1997: xxix); Habinek (2005).

Those suffering from ischnophonia might have had spasmodic dysphonia – vocal difficulty caused by cramping in the muscles of the vocal folds, such that they were stretched so tightly as to make it extremely difficult to produce a sound. Another explanation proposes that ischnophonia referred to stuttering with the vocal folds (laryngeal stuttering).⁶⁵ Alternatively, in this passage Galen might have been primarily demonstrating psychological insight, teaching self-confidence through breathing techniques.

Even more unique is a case recounted by Caelius Aurelianus:

One should use every possible means to encourage people to speak. If they do not succeed in this – in cases where the tongue completely refuses to function – they should be advised to form the words that they cannot pronounce in their thoughts. It sometimes occurs that the air that is formed in the depths of the lungs starts to move, ultimately forming those words that have been conceived in the minds of those who would speak them. In any case, they should also be taught to take care with the pronunciation of the first letter. Through careful self-training, they must learn to pronounce this letter clearly. This can best be done with vowels, thus avoiding any obstruction or closure to the organs of speech due to the difficulty of the sound of the letter. Once they have succeeded in this, one may proceed to assign nouns and proper names consisting of many vowels, as with ‘*paean*’ and the like. Numerals should be presented in the same manner, and we should assign our patients not to shout these words. We should then present to them the exercise of recitation and discussion. (Caelius Aurelianus, *Tardarum passionum* 2.41)

We know next to nothing about Caelius Aurelianus, and even less about his patients. He was a doctor from fifth-century Numidia, whose works in Latin were strongly inspired by the Methodist approach of the second-century Greek physician Soranus of Ephesus. In any event, his tips on deep breathing, concentration, the importance of shouting and starting with simple words and ending with conversation very closely approaches the speech-therapy practices that are still used today. The last sentence of the fragment suggests that his audience was relatively wealthy, and thus that participation in the rhetorical culture of declamation and recitation was important to them. Nevertheless, the opening sentence suggests that he wished to reach other people as well, or that he had at least considered therapy with people from other classes. Whatever the case may be, this remarkable fragment comes closest to contemporary therapies for stuttering and speech defects.

⁶⁵ Wollock (1997: 171–176).

Moses in the Jewish and Christian Traditions

When Moses was confronted with Yahweh in the form of a burning bush, he replied to the Lord: 'Please, my Lord, . . . for I am slow and hesitant of speech.' When he was called again, he replied: 'I am a poor speaker, so why should Pharaoh take any notice of me?'⁶⁶ In both the Septuagint and the Vulgate, these passages contain words that at least suggest a speech defect: the Greek *ischnophonos* and *braduglossos*, and the Latin *impeditioris et tardioris linguae, incircumcisi labiis*.

Did Moses suffer from a speech defect? An entire rabbinical tradition was convinced that he did. According to one Haggadist rabbinical tradition, the three-year-old Moses, in a playful mood, had placed the Pharaoh's crown on his own head. The monarch's advisors saw this as a bad omen, and they were greatly disturbed. They decided to subject the toddler to a trial by ordeal. Two balls were placed before him: a golden ball and a glowing hot ember. If Moses were to choose the golden ball, he would be put to death, as his choice would betray his covetousness. The boy first reached for the golden ball, but the angel Gabriel guided him towards the small, glowing ember. When he brought it into his mouth, he burnt his tongue. He then suffered from a speech defect or – according to other sources – became a stutterer.⁶⁷ A vast and elaborate Jewish exegetic tradition exists in which Moses' speech impediment is continually emphasised.⁶⁸

In contrast, the Christian tradition makes a radical choice for an allegorical explanation of Moses' speech problems. His weakness of speech should be explained by the fact that he had been overcome by the presence of God, by his anger at the injustice that the Pharaoh had committed or simply because he no longer had the command of the Egyptian language needed for debate.⁶⁹ Origen would even devote an entire commentary to the allegorical interpretation of Moses' speech problem. An entire series of Greek and Latin Church Fathers would follow him in this vein.⁷⁰ To this end, they refer to such New Testament passages as Acts 7.51, in which such formulations as *incircumcisi cordibus et auribus* ('with uncircumcised

⁶⁶ Exodus 4.10 and 6.30 (*New Jerusalem Bible*). ⁶⁷ Exodus R. 1.31.

⁶⁸ This refers to literally hundreds of studies. For a primary orientation, see Jacobs et al. (1906); Tigay (1978); Attanasio (1997); Cicurel and Shvarts (2003).

⁶⁹ These explanations in Philo, *Quis rerum divinarum heres sit* 4 and 16; *On the Life of Moses* 1.83; Clement of Alexandria, *Stromata* 4.17.106; Cyprian, *Epistula ad Fortunatum de exhortatione martyrii* 10 (PL 4.664).

⁷⁰ Origen, *Three Sermons on Exodus* (p. 12.310–317). See Laes (2013c: 169–170) for further passages.

hearts and ears') in the Vulgate were evidently interpreted symbolically as 'stubborn' (*New Jerusalem Bible*).

Because Jesus does not heal any stutterers in the New Testament, the Christian writers maintain silence on this issue. As noted previously, only the Greek version of the New Testament is a possible exception.⁷¹ In the Christian discourse, speech impairments received no further symbolic interpretation such as that observed for blindness or deaf-muteness.

In the various chapters of this book that list disabilities 'from head to toe', speech defects undoubtedly constitute the thinnest file. We are able to find only a handful of examples of people who might have suffered from speech impediments. Even in these scarce cases, it is usually far from clear which disorder they involve. Moreover, many appear more likely to involve oratorical ineptitude or inexperience. Legal texts pass over the affliction. Although ancient medicine applies a rich aetiology of disturbances in the organs of speech, we receive only an occasional glimpse of anything that might pass for speech therapy.

Once again, we are confronted with the limitations that the sources impose upon us. In a rhetorical culture, the word was at the centre. Any aristocrat who could not get by on verbal facility would fall outside this culture and, at most, be mentioned as a curiosity or an object of ridicule. Most of the cases that tell of improvement have to do with progress made through individual courage or perseverance. The interest of the ancient authors does not extend much beyond that.

⁷¹ In Mark 7.32, the deaf-mute (in Latin, *surdus* and *mutus*) is referred to in the Greek as *kophos* and *mogilalos* ('deaf and speaking with difficulty'). Cf. above p. 122.

Mobility Impairments *History of Pain and Toil*

Philip II of Macedonia and Other ‘Crippled’ Kings

When the Macedonian king Perdiccas III was killed in the summer of 360 BC, along with 4,000 of his troops, during the war against the Illyrian monarch Bardyllis, his son Amyntas was too young to ascend the throne. Although his uncle Philip was appointed regent, he was soon recognised as the ruler of the Macedonians in 359 BC. Within a span of twenty years, he would expand the Macedonian kingdom into the most important power in Greece. He was assassinated in the capital city of Aegae in 336 BC, leaving the road open for his son Alexander to conquer nearly the entire known world to the east of Greece. In his *Library of History*, however, Diodorus Siculus refers to Philip of Macedonia, and not his glorious son Alexander, as ‘the greatest of the kings of Europe’.¹ Biographers from the twentieth century have generally shared this admiration for the monarch’s greatest achievements, and, after the discovery of the burial sites of kings in Vergina by the Greek archaeologist Manolis Andronikos in 1977, the royal tombs of the Macedonian dynasty have become one of the most popular tourist attractions in Greece.² Anyone who has seen the gilded greave of the monarch or has observed an image of his deformed face on a tiny ivory statue will immediately realise what his contemporaries had already known: this man had been capable of great achievements, despite the physical pain and suffering that he had to endure in the process.

In 330 BC, his opponent Demosthenes formulated it as follows:

[A]nd knowing as I did that our antagonist Philip himself, contending for empire and supremacy, had endured the loss of his eye, the fracture of his collar-bone, the mutilation of his hand and his leg, and was ready to sacrifice to the fortune of war any and every part of his body, if only the

¹ Diodorus Siculus, *Library* 16.95 (trans. A. Smith).

² The most recent biography is that of Worthington (2008).

life of the shattered remnant should be a life of honor and renown.
(Demosthenes, *On the Crown* 67; trans. C. A. Vince and J. H. Vince)

The ancient sources mention the eye injury and the limp the most frequently. During the siege of Methone in 356 BC, Philip had lost his right eye to an arrow that had been shot from the defensive walls. Due to the skilful intervention of his personal physician Critobulus, Philip's eye socket avoided further mutilation. According to a later account, it was forbidden thereafter to utter the word 'eye' or 'Cyclops' in the presence of the king.³

In 341 BC, during a battle on the Thracian border, Philip was seriously injured in his femur when a spear passed through his leg. Most ancient historiographers do not say whether it was the right or the left femur that had been struck.⁴ The wound was so severe that the soldiers believed that their sovereign would die.⁵ Philip survived, but the damage to the muscles and nerves would cripple him for the rest of his life.⁶ Nowhere, however, do we read about any change in his strategy or a different approach to his political functions. He apparently had little trouble riding a horse. The 'crippled King' remained on the throne, and ancient authors make hardly any further reference to his disabilities.⁷ This occurs in the Greek tradition, which existed centuries before Philip. Homeric heroes received gruesome injuries, were healed or died, only to return to the battlefield. We read very little about their damaged bodies.⁸

Philip was not the only crippled king in Greek history. From the early Greek period, we can recall a king of Cyrene and a monarch of Athens whose feet were disabled.⁹ Agesilaus II was one of the greatest rulers of Sparta. He reigned from around 398 until 359 BC. At the age of eighty, with a body covered in wounds, he embarked on a new military expedition.¹⁰ The king had probably been lame since an early age, in addition to being short and of

³ Pliny the Elder, *Natural History* 7.124 (Critobulus); Pseudo-Demetrius, *De Elocutione* 293 (Cyclops). A complete description of the eye damage in Samama (2013: 236–238).

⁴ Plutarch, *On the Fortune of Alexander* 331c; Demosthenes, *On the Crown* 67; Justin, *Epitome* 9.3.2. Only Didymus col. 12.43 (*Fragmenta Graecorum Historicorum* (ed. Jacoby) Ilb.115f frag. 52) notes that the incident involved the right leg.

⁵ Justin, *Epitome* 9.3.3.

⁶ Hippocrates, *Prorrhetikon* 2.15 (9.40–43 Littré) recognises such consequences for similar injuries.

⁷ Samama (2013: 238–239) has collected all ancient texts on Philip's thigh injury.

⁸ Samama (2013: 232–233) on *The Iliad* and *Odyssey* and war injuries.

⁹ Herodotus, *Histories* 4.161–162 on Battus III of Cyrene, a limper (*cholos, ouk artipous*). This Battus, who reigned from about 550 to about 530 BC, was the great-great-grandson of the founder Battus, who is known primarily as having suffered from a speech defect. Cf. below p. 134 and 137. See Ogden (1997: 60–61) on the 'disabilities' of the Batti and the scapegoat function thereof. See also the Athenian Medon, the mythical first archon of Athens, who was paralysed in one foot (*cholos*). He was the son of King Codrus. His brother Neileus challenged him for the throne because he did not want Athens to be ruled by a cripple, but he was defeated and left for Ionia. See Pausanias 7.2.1 and Ogden (1997: 95).

¹⁰ Plutarch, *Agesilaus* 36.

unremarkable appearance. According to Plutarch, he always made every effort to hide his deficiencies, succeeding exceptionally due to his humour and personality. The disability in his feet had also never prevented him from performing even one of his royal duties. We obviously never learn exactly how Agesilaus coped with his disability on a daily basis (within the Spartan context, in which physical integrity was of exceptional importance).¹¹ Plutarch argues that Agesilaus certainly did not wish to make a display of his physical problems. Could this be related to the fact that they were not due to war injuries?

Plutarch also writes about Alexander and Philip:

When the thigh of his father Philip had been pierced by a spear in battle with the Triballians, and Philip, although he escaped with his life, was vexed with his lameness, Alexander said, 'Be of good cheer, father, and go on your way rejoicing, that at each step you may recall your valour.' (Plutarch, *On the Fortune of Alexander* 331b; trans. F. C. Babbitt)

The contrast with his son Alexander could not be greater. He proudly displayed his scars and his injured body, as a sign of his courage and power. Would the best commanders of his army not be proud of their war injuries?¹² Nevertheless, all the authors who recount this about Alexander are from the Roman period. Might a paradigm shift have taken place? Had times changed? It appears that the Romans were much more likely to glorify the heroic body of the veteran.¹³ In this respect, Philip plays a pivotal role. The classic Greek custom of concealing defects and the Roman tradition of glorifying them were united in him, according to the manner in which he is presented in each of the respective traditions. For this chapter as well, he is of interest for both the practical and emotional interpretations that can be assigned to lameness.

Mobility Impairments Then and Now: Osteology and Demography

Mobility figures prominently in the *World Report on Disability*. This is hardly surprising in a world in which rapid movement and travel are advanced as important prerequisites for an individual's development.

¹¹ Plutarch, *Agesilaus* 2–3. See Luther (2000) on Agesilaus and his disability.

¹² Plutarch, *On the Fortune of Alexander* 331c; Arrian, *Anabasis* 7.10.2 on the wounds of Alexander; Curtius Rufus, *History of Alexander* 4.16.31–32 on the captains of Alexander.

¹³ Samama (2013: 243–246). See also Laes (2011f) on the various Roman approaches to invalids of war.

Throughout the world, certain people feel more or less restricted in their freedom of movement. Such restrictions may be related to purely external factors, as with high thresholds and bumpy streets for wheelchair users or those who have difficulty walking, or inadequate road infrastructure or architecture in general. Nevertheless, a sense of insecurity can cause people to dread or limit their movements. Internal physical factors obviously play a role: an individual who suffers pain at the slightest movement has little urge to move about. In medical-diagnostic terms, mobility impairments can be related to nearly any disability: club feet, unhealed fractures, congenital or acquired paralysis, undernourishment, missing limbs from birth or due to amputation, accidents, epilepsy, gout, motor-neurological problems (possibly related to old age), and even the disabilities discussed earlier in this book, including eye problems, deaf-muteness and intellectual disabilities can hinder mobility to various degrees. Because the phenomenon unites a wide range of factors and diagnoses, mobility impairments are not addressed separately in the *Health Topics* of the United Nations.¹⁴ Although a separate Fact Sheet is dedicated to physical activity, it focuses on health, exercise and nutritional programmes. In statistics on insufficient physical activity, affluent countries in North America and Europe score particularly high.¹⁵

For this chapter, therefore, we must do without demographic tables that in some respect allow comparisons with the ancient world. With regard to terminology, we encounter an even greater problem than was the case for other disabilities. Essential questions remain with regard to what led the Greeks and Romans to label individuals as ‘crippled’ or ‘lame’. Nor are contemporary terms particularly clear. We can obviously search lexicons. The Greek *kullos* and *cholos* appear to provide the best approximation for the meaning. Vaguer terms include *anapèros* (‘maimed’, ‘defective’) or *ouk artipous* (‘poor at walking’). Latin terms include *mancus*, *claudus* (‘crippled’) and *truncus* (‘maimed’), in addition to such more specific terms as *scaurus* (‘club foot’, a word existing in Greek as well), *valgus* (‘crooked leg’) and *varus* (‘crooked’). Each of these broad terms can cover a wide range of gradations from limping to complete immobility. Cross-legs, bow-legs, humps, wounds, missing limbs, deformities in the legs or feet, fractures, arthritis and gout can all be found by screening the sources according to these words.¹⁶

¹⁴ who.int/topics. ¹⁵ http://who.int/gho/ncd/risk_factors/physical_activity/en/index.html.

¹⁶ Horstmanshoff (2013: 209–210) has referred to the highly confusing terminology and lack of consensus in the lexica. He correctly notes that comprehensive field research is needed in this regard.

For example, although Plutarch writes that *cholos* refers specifically to problems relating to the legs, he uses the word to describe the limping pace of Agesilaus, as well as with reference to the engineer Artemos, who was lame and had to be carried all the time.¹⁷ As a specific term for complete lameness, there was the Greek *paralytikos*, transformed in Latin to *paralyticus*, although these terms are also used in the context of partial paralysis. In addition, the English 'lameness' is applied more broadly than its equivalent terms in other languages (e.g. the Dutch *lamheid*). In some cases, mobility problems are reported in a more general context. Aristotle observes that the limbs of some people move to the left when they are intended to turn to the right. Although he obviously has no conclusive neurological explanation for this phenomenon, he establishes it as unusual.¹⁸

Did the ancients even have any concept of 'mobility impairment'? Three delineations come to mind. Those who had so much difficulty in movement that it was impossible for them to work might have been regarded as 'mobility impaired'. The same could apply for those whose living comfort was seriously diminished due to constant pain in the limbs. Finally, those who walked oddly due to disabilities might have been objects of ridicule, and thus regarded as different.

The relatively new approaches of palaeopathology and osteology might be helpful in this regard. The dossiers are upsetting. In two burial sites from the Imperial period in Urbino, 83.3 per cent of the adult male skeletons and 85 per cent of the adult female skeletons show signs of at least one fracture. Infections (periostitis) and swelling of the bones were common, as were difficulties relating to forward motion. Anyone who has ever visited Urbino knows that it is located in a mountainous area. Arthritis was found in 47 per cent of the men and in 58 per cent of the women, while trauma caused by constant, heavy physical labour could be traced in about 40 per cent of the skeletons.¹⁹ The Urbino file is far from unique, however, although the percentage of fractures there is exceptionally high. Excavations at the suburbs of metropolitan Rome (in the Via Collatina), the beach of Herculaneum, the burial site in Casal Bertone near Rome and even at Dorchester, England, all exhibit a similar pattern of bone deformities due to undernourishment in childhood, along with fractures and stress factors due to long physical labour.²⁰ New finds from

¹⁷ Plutarch, *On the Intelligence of Animals* 963c-d; *Agesilaus* 2.2–3; *Pericles* 27.3–4. See Rose (2003: 13).

¹⁸ Aristotle, *Nicomachean Ethics* 1102b. See Adkins (1976). ¹⁹ Graham (2013: 253–255).

²⁰ Graham (2013: 255) with references to specialised literature. On Herculaneum, see Laes (2008a: 235–237). On Dorchester, see Farwell and Molleson (1993).

places as diverse as the necropolis in the suburbs of Rome, namely Quarto Cappello del Prete and Collatina, or the Egyptian Oasis of Kharga add to the picture of early childhood labour, with subsequent trauma and pain.²¹ In this society, pain and difficulty in movement were part of the day-to-day reality – which brings us to the question of whether this was experienced as a separate, distinct disability.

Four skeletons from the Via Collatina near Rome might offer an answer to this difficult question. All four were buried together in ‘Mausoleum 2’, which was situated at some distance from the main road.²²

The first body (T 5) was a robust man of about thirty years of age. His legs offer particularly convincing evidence that his sturdy form was due to long, heavy physical labour. At the same time, there were traces of serious fractures and shin splints on his right shin. His head exhibited heavy trauma caused by two severe blows, the impact of which extended to the vertebrae of the neck. His forehead exhibited a laceration measuring 2 centimetres; his right eye socket and jawbone were heavily damaged and most of his teeth were missing. His palate and front teeth jutted forward remarkably. Because the man was somewhat too large for the tomb, he had been stuffed into it rather hastily.

To the southeast of this tomb lay another man (T 2), between twenty and twenty-three years of age. His right shoulder was 5 centimetres shorter than his left shoulder, and his head was in a somewhat twisted position due to congenital chondrodysplasia, calcification and deformation of the cartilage, which also affected his spine. He certainly had the appearance of a hunchback. In some cases, chondrodysplasia is accompanied by mental retardation, abnormal facial movements and skin defects. There were no traces of such conditions on the skeleton. Nevertheless, the man undoubtedly lived with pain. He suffered from a hernia, and his teeth were in miserable condition. Gout was also a part of his day-to-day reality. Despite the fact that his physical posture and movement must have posed major problems for him, the physical development of his limbs indicates that he had performed long periods of heavy physical labour.

In the northern section, a woman of forty-five to fifty-five years old (T 4) had been hastily shoved into a small, oval grave before the onset of rigor mortis. Spondylitis, a chronic affliction, had caused her spinal

²¹ Laes (2015) summarizes three recent volumes and more than 1,500 pages concerning child burial in antiquity – a considerable amount of these archaeological and osteological finds confirm the gloomy picture.

²² Graham (2013: 259–266) for the medical and archaeological details from the file.

column to develop in an 'S' shape. For a large portion of her life, she had been condemned to be hunched over. Upon her death, she had but one remaining tooth. In contrast, the skeleton of a robust young man aged twenty to thirty years (T 1) in Mausoleum 2 shows no trace of anatomical problems.

Archaeologists have wondered why these four individuals, who were probably unrelated to each other and who had probably not lived in exactly the same period, had received such 'unusual' treatment. They were buried in a location that had already been used, somewhat remote from the road – a place where burial waste was deposited. Some were buried in unusual positions. Perhaps these people had been regarded as 'strange' or 'unusual' because of their appearance or behaviour. A mental defect might explain the presence of the anatomically normal individual T 1 in the mausoleum. Whatever the reason, all four were buried in a relatively large monument. Someone arranged for these burials. Perhaps they were members of a funeral society or had relatives nearby. In particular, the hunchbacked woman would not have lived for so long without people to care for her. Nevertheless, all four had worked, and they had thus participated in the community. At any rate, the physical disabilities that had marked three of the four, confronting them daily with heavy pain, was not what had distinguished them from the rest of the population. Moreover, these disabilities had not prevented them from performing heavy physical labour. This provides an indication that the disability that we wish to address in this chapter is often passed over, almost without a thought, given that it was simply the condition of so many people.²³

Ancient Physicians on Deformities, Fractures and Healing

The tracts of ancient physicians contain extensive information on the healing of bone injuries, both congenital and acquired.

Physicians and natural philosophers often attributed mobility impairments to hereditary factors. For example, Hippocrates, Aristotle and Pliny the Elder write that lame or crippled parents also brought forth lame children.²⁴

Club feet are a relatively common affliction (1 in 1,000 births), in which the feet are turned inward from the ankle. The United Nations report

²³ Garland (2010: 34) also states that most occupational activities were accessible to crippled people, which might explain why they are mentioned less frequently in the sources.

²⁴ Hippocrates, *On the Sacred Disease* 2 (6.364 Littré); Aristotle, *Historia Animalium* 585b–586a; Pliny the Elder, *Natural History* 7.50.

mentions intensive campaigns in Uganda and Malawi to correct the condition in babies.²⁵ If not properly treated, club feet can cause serious impairments in locomotion.

The option of manipulating club feet in newborns has been applied since ancient Egypt. Hippocrates prescribes a treatment based on what is now known as manual therapy, binding and corrective shoes – a treatment that appears surprisingly modern and quite efficient at first sight.²⁶ In this case as well, however, we should be cautious about making any absolute statements. The contemporary field of orthopaedics distinguishes several diagnoses for the phenomenon of club feet, and modern therapies are based on insights developed in the nineteenth century within the fields of biomechanics, anatomy and paediatric orthopaedics. Anyone who would simply equate the Hippocratic club foot (*kullos*) with the modern club foot would be engaging in irresponsible retrospective diagnosis.²⁷

Most cases of congenital club-foot are remediable, unless the declination be very great, or when the affection occurs at an advanced period of youth. The best plan, then, is to treat such cases at as early a period as possible, before the deficiency of the bones of the foot is very great, and before there is any great wasting of the flesh of the leg. There is more than one variety of club-foot, the most of them being not complete dislocations, but impairments connected with the habitual maintenance of the limb in a certain position . . . In a word, as if moulding a wax model, you must bring to their natural position the parts which were abnormally displaced and contracted together. So rectifying them with your hands, and with the bandaging in like manner . . . This, then, is the mode of cure, and it neither requires cutting, burning, nor any other complex means, for such cases yield sooner to treatment than one would believe. However, they are to be fairly mastered only by time, and not until the body has grown up in the natural shape; when recourse is had to a shoe, the most suitable are the buskins, which derive their name from being used in traveling through mud; for this sort of shoe does not yield to the foot, but the foot yields to it. A shoe shaped like the Cretan is also suitable. (Hippocrates, *De articulis* 62 [4.264–268 Littré]; trans. F. Adams)

It is not surprising that Hippocrates advises against surgical intervention. Tenotomy, which involves making an incision in the Achilles tendon, was not introduced until the nineteenth century, and manipulative treatment

²⁵ World Health Organization (2011: 123).

²⁶ Garland (2010: 125–126); Horstmanshoff (2012: 3–5) with outstanding illustrations. Michler (1963) remains the basic work on this material; Cilliers and Retief (2009b) offer a concise introduction to ancient orthopaedics.

²⁷ Horstmanshoff (2013: 208–209).

currently remains the first option.²⁸ Galen devotes extensive commentary to this Hippocratic chapter, also advising adaptive shoes for correcting the feet. He also advises against allowing children who are being treated for club feet to walk too soon.²⁹

The ancient physicians appear to be less aware of other congenital bone diseases, although their comments do tell us something about the day-to-day reality. According to Soranus of Ephesus, many children in Rome had bone deformities. He attributes this to the fact that Roman matrons were not capable of providing as much maternal love as were their Greek counterparts.³⁰ In reality, the cause should be sought in rickets or the 'English disease'. Particularly in urban environments, vitamin deficiencies and undernutrition in infants led to deformities of the bones. Although the question of whether young and adult Romans also suffered a chronic deficiency of proteins and calories has been answered in many different ways in scientific research, the osteological findings increasingly appear to offer a definitive answer which indeed points to deficiency.³¹

Deformities of the spine resulting in humps also receive ample attention in the Hippocratic tract on the joints.³² In this source, we read about deformities from childhood, as well as about the strange notion that the growth of such humps can be related to the doctrine of humours. From this perspective, humps were not always incurable. According to Hippocrates, chronic dysentery or the occasional drainage of the arteries could offer a solution.³³ In a particularly plastic description, he relates how 'show doctors' – to the great merriment of their audiences – would tie hunchbacks to upright ladders affixed to walls or to the façades of houses. Using a crane mechanism, the poor creatures, some even with their heads pointing downwards, would be vigorously shaken back and forth. Such spectacular displays drew only disdain from Hippocrates.³⁴ A mocking epigram about a hunchback whose doctor had buried him under stones suggests that such drastic procedures were at least known.³⁵ Hippocrates himself is not completely without fault. Even he once had a hunchback lie on his belly on a wooden bed placed against a wall. Planks anchored in the wall were

²⁸ Horstmanshoff (2012: 4).

²⁹ Galen, *In Hippocratis De articulis librum commentarius* 4.1 (18.1.667–683 Kühn).

³⁰ Soranus, *Gynaecology* 2.16.

³¹ Gourevitch (2001: 24). Negative evaluations, with reference to deficiencies, can be found particularly in Garnsey (1991) and Sippel (1987). For recent syntheses on nutrition and physical well-being, see Erdkamp (2012); Scheidel (2012: 324–329).

³² See Garland (2010: 125–126). ³³ Hippocrates, *De articulis* 41 (4.176–180 Littré).

³⁴ Hippocrates, *De articulis* 42 (4.182–186 Littré).

³⁵ *The Greek Anthology* 11.120. See Horstmanshoff (2012: 4).

placed crosswise over the man, with the doctor subsequently applying pressure to them.³⁶ One time, he even tried to use a bellows to apply counter pressure to the hump of a patient lying on his back:

I once made trial of the following plan ... But the experiment did not succeed ... I have written this expressly; for it is a valuable piece of knowledge to learn what things have been tried and have proved ineffectual, and wherefore they did not succeed. (Hippocrates, *De articulis* 47 [4.210–213 Littré]; trans. F. Adams)

Possibly the most relevant comment in the entire Hippocratic description of hunchbacks is the statement that most reached old age largely without pain, particularly those who were more corpulent, although they seldom lived longer than sixty years.³⁷ In this case, might the writer have been referring to hunchbacks who performed daily labour without their activity being regarded as remarkable?

Poorly treated fractures were obviously the cause of many permanent mobility impairments. It is not surprising that both the Hippocratic physicians and Galen devoted extensive attention to the treatment of fractures.³⁸ We read that, although it is not actually difficult to bind a broken arm, some physicians did more harm than good through improper treatment.³⁹ Patients who had fallen on their heels from great heights were at risk for internal haemorrhaging, gangrene and death of the foot.⁴⁰ The manual 'reduction' of the bone (setting the fragments back in place) was often advised.⁴¹ The Hippocratic treatises are filled with concrete daily observations. Broken feet heal completely after twenty days of rest. Nevertheless, many patients did not have such patience (or they could not afford it). As a consequence, they continued to experience pain whenever they stood on their legs and walked.⁴²

³⁶ Hippocrates, *De articulis* 47 (4.202–213 Littré) with illustrations.

³⁷ Hippocrates, *De articulis* 41 (4.182 Littré).

³⁸ Rose (2003: 17–19) for an outstanding summary. In addition to the existing text editions with commentary, Longo and Ciani (2002–2003) also offer interesting information. The entire Hippocratic doctrine on broken bones and joints was followed and commented on by Galen. See his *Hippocratis De fracturis liber et Galeni in eum commentarius* (18.2.318–628 Kühn).

³⁹ Hippocrates, *De fracturis* 1 (3.417–421 Littré).

⁴⁰ Hippocrates, *De fracturis* 11 (3.452–457 Littré). On gangrene: Galen, *In Hippocratis De articulis librum commentarius* 4.16 (18.1.688 Kühn); *De timoribus praeter naturam* 12 (7.726 Kühn). See Salazar (2000: 33).

⁴¹ Hippocrates, *De fracturis* 13 (3.460–466 Littré); Galen, *In Hippocratis De fracturis librum commentarius* 1.44–45 (18.2.400–404 Kühn).

⁴² Hippocrates, *De fracturis* 9 (3.450 Littré).

Atrophy or emaciation of incompletely healed legs or legs that had become crooked and too short are mentioned as well.⁴³ In the case of open fractures to the foot, physicians could not apply reduction, for fear of death due to infection. Such patients would then remain ‘much maimed and deformed’ for the rest of their lives.⁴⁴ Broken hips inevitably caused major mobility problems for life.⁴⁵ Once again, the Hippocratic works tell us about mangled limbs. Adults are forced to rest on a staff at the side of the sound leg. They are forced also to stoop and therefore look smaller than they were before. For younger children, mangled limbs are even more dramatic. They too lose the erect position of their body and crawl about miserably on the sound leg, supporting themselves with the hand of the sound side resting on the ground.⁴⁶

Gout was a problem that often affected elderly Romans. In any case, the medical literature often linked the condition to the afflictions of old age. According to Hippocrates, it was incurable; Galen ascertains that it is incurable and that it does not affect eunuchs, and Celsus notes that the disease could begin earlier, although it is completely incurable at later ages.⁴⁷ A passage from the *Codex of Justinian* suggests how frequently this painful affliction occurred. Whereas arthritis was a reason to be exempted from certain obligations (e.g. serving in official positions), gout was not acceptable as an excuse.⁴⁸ It is interesting to note that the ancient medical literature often associated elderly people with wine consumption – perhaps a reason for the onset of gout.⁴⁹

In exceptional circumstances, physicians were forced to amputate. Hippocrates describes a case of gangrene, in which the limbs were black and completely without sensation. It was necessary to cut away everything under the black discolouration. This had to be done with the greatest of care, for if a part that was still alive were to be cut away in the process, the patient would often lose consciousness due to the pain. Hippocrates notes dryly that cases of amputation are more gruesome to observe than they are to perform.⁵⁰ The sophistic subtlety that the term ‘two-footed’ is not an

⁴³ Hippocrates, *De fracturis* 14 (3.470 Littré); 16 (3.474–479 Littré).

⁴⁴ Hippocrates, *De articulis* 63 (4.269–275 Littré); trans. F. Adams.

⁴⁵ Deuteronomy 33.11: ‘Crush the loins of those who rise against him and of his foes, so that they rise no more!’ (*New Jerusalem Bible*).

⁴⁶ Hippocrates, *De articulis* 52 (4.228–233 Littré); trans. F. Adams.

⁴⁷ Hippocrates, *Prorrhetikon* 2.8 (9.26 Littré); Galen, *In Hippocratis Aphorismos* 6.28 (18.1.43 Kühn) and *De sanitate tuenda* 5/8 (6.349 Kühn); Celsus, *On Medicine* 2, 8, 28). See Parkin (2003: 255 and 425–426 n. 77).

⁴⁸ *Codex of Justinian* 10.5.1.2–3. See Parkin (2003: 135 and 372 n. 149).

⁴⁹ Gourevitch (2013: 80). ⁵⁰ Hippocrates, *De articulis* 69 (4.282 Littré).

appropriate description for humans, given that not every human has two feet, is noted by Aristotle. Perhaps the reading public had some idea in this regard.⁵¹ For the Roman period, Celsus describes how a portion of the flesh must be pulled backwards when cutting through the diseased bone. After the amputation, this flesh would be replaced over the remaining bone to serve as protection. Once again, we read that many patients did not survive the operation, due to shock or blood loss. In this case, Celsus does not appear to care whether the procedure was safe. In the case of advanced gangrene, surgery was the only solution.⁵² The non-Christian sources offer exactly four passages mentioning prosthetics: twice in reference to wooden feet, once in reference to an iron hand and once in reference to a wooden leg.⁵³ Archaeological and iconographic evidence for the existence of prostheses is extremely rare. This is not surprising, because they usually were made of wood. In a Roman grave in Capua, a corpse was discovered that was missing the right leg. A wooden femur coated in bronze was found next to the skeleton. Perhaps the manufacture of prosthetics was more likely to be the work of craftsmen, which could explain why they are never mentioned by the medical writers.⁵⁴

A Glimpse of Daily Life

‘[A]ll the day long does he sit for whole days together at home like a lame cobbler,’ writes Plautus. Sedentary trades (e.g. potter, shoemaker) could easily be performed by people with mobility impairments.⁵⁵ In the literary letters by Alciphron, we meet a ‘lame’ butcher.⁵⁶ The papyri offer particularly fine examples of the occupational activities of ‘cripples’ (*choloï* – they could thus also have referred to people with a limp, or even those with such nicknames as Gimp): a craftsman, an overseer, a weaver of linen and even a priest in Busuris.⁵⁷ All signs indicate that these people, despite their

⁵¹ Aristotle, *Topics* 134a. ⁵² Celsus, *On Medicine* 7, 33, 1–2.

⁵³ Herodotus, *Histories* 9.36–37; Plutarch, *On Brotherly Love* 479b (Hegistratus of Elis and his wooden foot); Pliny the Elder, *Natural History* 7.104–106 (Marcus Sergius Silus and his iron hand); Martial, *Epigrams* 10.100 (wooden leg); Lucian, *Adversus indoctum et libros multos ementem* 6 (two wooden feet). See Bliquez (1996: 2662–2664) and Samama (2010). The following Christian sources can be added: Gregory of Tours, *Life of Martin* 3.9 and 4.41. See Laes (2011b: 49).

⁵⁴ Bliquez (1996: 2664–2667) on assumed iconographic examples; 2667–2673 on Capua; 2673–2674 on early medieval findings.

⁵⁵ Plautus, *Aulularia* 72–73; trans. F. Leo. ⁵⁶ Alciphron, *Epistles* 3.27.1

⁵⁷ *P. Berl. Möller* 11.2–5 (AD 33) on Heracles the craftsman; *P. Oxy.* xix.2240.32 (AD 211) on Naarous the overseer; *P. Leipz.* 11 recto 7 on Areios the linen processor; *BGU* iv.1196.67 (ca. 11–10 BC) on Petaus the *phyle* priest. See Arzt-Grabner (2012: 4849). The lists in Cernuschi (2010: 149–166) contain primarily examples of scars on limbs and the upper torso.

disabilities, were well integrated into society. Most probably, they were also married. Only one passage in Herodotus suggests that a marriage to a crippled woman (the name Labda refers directly to the Greek letter *lambda*) was not common. This example concerns a daughter of the ruling family in Corinth, not exactly the same environment as the workers mentioned above.⁵⁸

For the Roman upper class, politics was part of active life. Mobility impairments did not necessarily pose an obstacle in this regard. In the case of Roman aristocrats who 'suffered from their feet', many were gout patients. The painful affliction was no reason to discontinue participation in politics. Of a three-person delegation leaving for Asia in 149 BC, one man had a permanent scar from a stone on his head, another suffered from gout and the third was regarded as a fool. Cato notes mockingly that it was a delegation without mind, feet or head.⁵⁹ Antonius Hybrida, Cicero's co-consul, used gout as a pretext for not participating in the battle against Catilina. The affliction had not impeded him from building a successful political career.⁶⁰ Cicero writes that he had known many prominent men who had been affected by the terrible pain of the affliction.⁶¹ The Emperor Galba was so tormented by gout in his hands and feet that he was unable to wear shoes, and he could not unroll or even hold a scroll.⁶² According to Tacitus, Hordeonius Flaccus – the weak governor of Germania Superior – suffered from 'weakness of the feet' (*debilitas pedum*).⁶³ Corellius Rufus, a friend of Pliny the Younger, had suffered from the condition since the age of thirty-two. Because the pain was unbearable, he ended his life at the age of sixty-seven. In his later years, although he had retreated to his estate, he continued to have an active social life, surrounded by his *familia*.⁶⁴ Fronto, a letter writer, who constantly reported on physical conditions, complained of painful fingers that made writing even more difficult for him.⁶⁵

War injuries of aristocrats are also mentioned. Spurius Carvilius Ruga served twice as consul, and he was honoured with a victory parade for his victories against the Corsicans and the Sardinians:

⁵⁸ Herodotus, *Histories* 5.92b. See Ogden (1997: 90): the name Lambda refers to her feet, which were turned outward. See *Etymologicum Magnum* s.v. *blaisos*.

⁵⁹ Appian, *The Mithridatic War* 6; Livy, *Periochae* 50. The aristocrat with gout referred to in this passage was M. Licinius. See De Libero (2002: 88); Sallust, *Catilina* 59.

⁶⁰ Sallust, *Catilina* 59. ⁶¹ Cicero, *Tusculan Disputations* 2.45. ⁶² Suetonius, *Galba* 21.

⁶³ Tacitus, *Histories* 1.9.1. Such descriptions avoid technical such jargon as *podagra*.

⁶⁴ Pliny the Younger, *Epistles* 1.12.

⁶⁵ See Van den Hout (1999: 690) for 'autographs'; 691 on Fronto (topic 'his health').

For his mother's words to Spurius Carvilius, who was sadly lame from a wound received on national service, and for that reason shy of walking abroad, 'No no, my Spurius, go out! And let every step you take remind you of your gallantry.' (Cicero, *On the Orator* 2.249; trans. E. W. Sutton)

The touching anecdote reminds the reader of the encouragement that Alexander gave to his father Philip. The passage is certainly not an authentic testimony, although it is a literary topos used by the ancient writers in various situations. Nevertheless, it remains a fine illustration of the ambiguity of the aristocratic war veteran.⁶⁶

The senator Sextus Teidius is broadly presented as a noble exception. At an advanced age and lame in one leg, he participated along with Pompey in the battle at Pharsalus. He was ridiculed, but Pompey approached him, saying that it was an honour that someone so advanced in years would risk his life in his service.⁶⁷

An entirely different aristocratic reality is offered in the story about Titus Quinctius. Born into a prominent patrician family, he was working his land in Tusculum, not giving another thought to the honour of office and the city of Rome. A war injury to his foot had rendered him lame, and he had decided that he would no longer participate in the ambitions of the forum. In 342 BC, rebel soldiers forced him to become their commander. He was dragged out of his bed, and it was made clear to him that he had no choice. If he did not wish to command, he would die. The group left for Rome. Upon meeting a strong Roman army with the dictator Marcus Valerius Corvus, however, common sense prevailed. Livy repeats that Quinctius 'had had enough of fighting for his country and was the last man to fight against it'.⁶⁸

The wealthy were not spared from accidents. Injured in his youth by a blow from a chariot at the games, the Roman emperor Vitellius would suffer from a weak hip for the rest of his life.⁶⁹ With regard to the limping stride of the emperor Claudius, we read that it was due to his weak knees.⁷⁰

Those who could not move about on their own used carts or litters. This is specified in the Twelve Tables for those who were otherwise unable to come to court. For the poor or needy, the state was required to provide

⁶⁶ Cicero, *Brutus* 130 on Calvinus' political activity, despite his injury. For other examples of the same anecdote, see Plutarch, *Spartan Sayings* 241e-f (on Spartan mothers and their sons). See Samama (2010) and Laes (2011c: 6970), contra De Libero (2002: 88), who portrays Carvilius as suffering from gout.

⁶⁷ Plutarch, *Pompey* 64. See De Libero (2002: 88) on the career of Teidius.

⁶⁸ Livy 7.39–40; trans. C. Roberts. ⁶⁹ Suetonius, *Vitellius* 17. ⁷⁰ Suetonius, *Claudius* 30.

this service to be able to attend a trial.⁷¹ A cane, staff or lance would obviously be a less expensive solution, which was also accessible to the lower classes.⁷² The crippled Nicanor was sitting on a chair when a boy grabbed his crutch and ran away with it. Nicanor jumped up to pursue the boy, and he was healed.⁷³ In other cases, individuals could appeal to the support of helpers. In the shrine of Epidauros, a man came to seek healing from a severe ulceration on his toe. During the daytime, his servants carried him from the Abaton and placed him upon a chair. He fell asleep, a snake licked his toe and he was healed. Another man in Epidauros had knee problems and was placed before the adyton of the temple by helpers.⁷⁴ Crutches and a stretcher were the devices used by the paralysed Damosthenes. He would remain in the shrine for four months. In the final days of this period, he entered the temple with two crutches, returning again in good health.⁷⁵

Without assistance from relatives and/or household staff, situations were awkward at best. In the correspondence of Pliny the Younger, we read about the wealthy aristocrat Domitius Tullus, who was able to afford any conceivable aid in his old age. At a very old age, the man had married a somewhat older widow, who surely could have found a spouse with more vitality:

He had so entirely lost the use of all his limbs, that he could not move himself in bed without assistance; and all the enjoyment he had of his riches, was only to contemplate them. He was even reduced to the wretched necessity (which indeed one cannot mention without loathing as well as lamenting) of having his teeth washed and cleansed by others; and he used frequently to say, when he was complaining of the indecencies which his infirmities obliged him to suffer, that he was every day forced to lick his servants' fingers. Still, however, he lived, and was willing to accept of life what was mainly preserved to him by his wife, who, whatever censure she might incur by contracting the alliance, turned it to praise by her steadfast loyalty afterwards. (Pliny the Younger, *Epistles* 8.18.9–10; trans. W. Melmoth)

⁷¹ Cited in Gellius 20.1.30.

⁷² Plautus, *Asinaria* 427; *The Greek Anthology* 6.203. Elderly and having become almost completely immobile, Mucius Scaevola supported himself on a lance. See Cicero, *Pro C. Rabirio perduellionis reo* 21.

⁷³ Epidauros, Stele A 16. LiDonnici (1995: 96–97)

⁷⁴ Epidauros, Stele A 17 and B 18. LiDonnici (1995: 96–97, 112–113). Stele B 15 might refer to a lame man on a stretcher, but the reading is uncertain. LiDonnici (1995: 110–111).

⁷⁵ Epidauros, Stele C 21. LiDonnici (1995: 128–129).

The contrast with one who was forced to get by without the assistance of a member of staff could hardly be greater. In the distant Babylon, a certain Judas had fallen from his horse. If he wanted to turn onto his other side, two people would have to help him. He did not even have anyone to give him water when he wished to drink. In his great misery, he pleaded with his sister Mary, who lived in Egypt, to send her husband Joseph to Babylon. He had even searched in vain for a boat that would bring him back to Egypt.⁷⁶ We do not know what eventually became of the unfortunate Judas, who in any case was able to appeal for assistance and who might nevertheless have had some financial resources. The sources tell us nothing about the situation of the needy who were lame or impaired in their mobility but who lacked help from their family. Nevertheless, we have some idea. Being crippled is part of the standard descriptions of the ancient beggar.⁷⁷ The Greek proverb 'He who lives amongst the crippled will learn to limp' might be based on the fact that such people required constant care.⁷⁸

In the figure of Hephaestus/Vulcan, the Graeco-Roman tradition even had a crippled smith-god, a tradition that can also be found in German, Scandinavian and Anglo-Saxon mythology.⁷⁹ On the disability of Hephaestus, the Iliad contains two different, even contradictory versions. Father Zeus had grasped him by the foot and cast him from Olympus when he had chosen the side of his mother Hera during a marital conflict. After falling for a full day, he landed – more dead than alive – on the island of Lemnos, where he was taken in by the Sintians. On this volcanic island, he would become a smith. Elsewhere, we read that Hephaestus had been crippled from birth. Out of shame, his mother Hera had concealed him from the other gods. She eventually cast her child into the ocean, where two sea goddesses would take him in and teach him to forge jewellery.⁸⁰

In the *Homeric Hymns*, Hera accuses her husband Zeus of having first become the father of Pallas Athena without her involvement, thereafter begetting with her their defective son Hephaestus. She had then cast the child into the sea.⁸¹ Even in these early stories, ridicule, shame and compensation through craftsmanship are clearly evident. The marriage of

⁷⁶ *P. Oxy.* xlvi.3314.

⁷⁷ Parkin (2006) for a collection of texts on beggars. In Seneca the Elder, *Controversiae* 10.4.3 (on parents who would mutilate their children on purpose so that they could bring in more as beggars) 'broken feet' (*fractos pedes*) and 'weak limbs' (*debilia membra*) are reported.

⁷⁸ Plutarch, *The Education of Children* 4a. See Laes (2008b: 108) for this suggestion.

⁷⁹ Crocker (1977). ⁸⁰ Homer, *Iliad* 1.591–594; 18.394–405.

⁸¹ *Homeric Hymn to Aphrodite* 311–318.

the defective Hephaestus to the goddess of love, Aphrodite, was a common object of mockery. Other traditions mention his marriage to Charis or to Aglaea, the youngest of the three Graces. He even had a son by Aglaea.⁸² Hephaestus was clearly an ambivalent god – admired for his skill, while being mocked and marginalised for his work in the forges with the monstrous Cyclops. Beginning in the Classical period, his defects were only seldom depicted in art. Parallels do exist with images of crippled smiths. It remains quite unclear whether people with mobility impairments found any comfort in the fact that a god was a companion in their misfortune. The fact that the physiognomic tradition characterised weak ankles and a hump as cowardly or effeminate does not bode well.⁸³ Writers also like to compare Hephaestus to such outsiders as the hideous Thersites or the hunchbacked Aesop.⁸⁴

The Role of Christianity

The New Testament stories about the healing of the lame are no less vivid than those described in the healing inscriptions of Epidauros and the other Asclepian shrines. The man who was brought to Jesus on a bed in Capernaum was clearly a paralytic (*paralytikos*).⁸⁵ The detailed versions by Mark and Luke recount how the lame man was carried by four men. In order to bring him closer to Jesus, they made an opening in the roof and lowered the bed with the lame man to him.⁸⁶ An army of beggars who were sick, blind, crippled (*cholon*) and deformed (people with shrivelled limbs) lay near the bath house of Bethesda in Jerusalem, waiting to be healed by contact with the miraculous water. On the Sabbath, Jesus healed a man who was lying there, and who had been ill for exactly thirty-eight years. The man stood up, picked up his mat and was healed.⁸⁷ In Acts

⁸² Homer, *Iliad* 18.382 (married to Charis); Hesiod, *Theogony* 945 (married to Aglaea); Apollodorus, *Library* 3.16.1 (son of Anticlia). See Rose (2003: 37) on the 'successes' of Hephaestus in marriage and progeny.

⁸³ Pseudo-Aristotle, *Physiognomonica* 806b. See Horstmanshoff (2013: 215–216).

⁸⁴ For Hephaestus and disability studies, see particularly Schmidt (1983–84); Garland (2010: 61–63, 79–82) on ridicule at banquets; Ogden (1997: 35–37); Horstmanshoff (2012: 2) and (2013: 215). For the 'crippled' representation of blacksmiths in antiquity, see Vlahogiannis (2005: 190). For Thersites and Aesop, cf. above p. 53 (Thersites) and p. 118, 137 (Aesop). An outstanding overview of religious approaches to the smith-god is Bremmer (2010). Aterman (1995) and Wamser-Kraznai (2012) use retrospective diagnosis to determine the affliction of Hephaestus.

⁸⁵ Matthew 9.2–8. The standard list of works connected with the Son of Man includes making blind people see, making deaf people hear and making lame people walk. See e.g. Matthew 11.2–6 or Luke 7.22. See Roth (1997) on blind and lame people as stock figures in the New Testament.

⁸⁶ Mark 2.1–12; Luke 5.17–26. ⁸⁷ John 5.1–13.

Peter and John healed a man who had been lame (*cholos*) from birth. Every day, he was brought to the temple gate in order to collect alms. His jubilant walking and leaping in the temple after the healing throws the contrast with his previous state and the amazement of the people who had known him for years into even sharper relief. In Lystra, to the great amazement of the bystanders, Paul also healed a man who had no strength in his feet (*adunatos*) and who had been lame (*cholos*) from birth.⁸⁸

The lives of the saints from antiquity are filled with stories about the healing of paralytics or people with mobility problems. The example of the New Testament stories and the fact that such problems were often a part of daily life undoubtedly played a role.⁸⁹ Many of these stories offer striking details about daily life: the loner with the deformed limbs who owned one cow, which pulled him around in a cart so that he could beg in the villages; Gundulfus, who had once required the support of two servant boys but would eventually be healed completely; and the beggar Agustus, who could only drag himself along on his knees and arms.⁹⁰ Then there is the touching story of a young boy who worked as a shepherd. One day, his friends found him by a spring in severe pain. Because he could go no further, they carried him to his parents. They waited until the pain had subsided, but then decided to give their lame son to a group of beggars, undoubtedly because that was his only option for providing himself with income. He would ultimately spend ten years with the beggars before being healed. Another young boy named Leodulfus belonged to a group of day labourers. He had a heavy limp, and he had been left behind by his co-workers, who were in a hurry to attend the feast of St Martin in Tours. Passers-by found him weeping and took him along on their cart. This story raises many interesting but unresolvable questions. The boy's defect apparently did not impede him from functioning as a day labourer. Did he have parents, who had placed him in this group? Was he an orphan, forced to fend for himself? Was there truly no group solidarity amongst the labourers, or was their haste to be on time for the celebration the cause of their exceptional behaviour?⁹¹

⁸⁸ Acts 3.1–10 (Peter and John); 14.8–12 (Paul).

⁸⁹ Statistical investigation of the extensive miracle collections of Gregory of Tours indicates that mobility problems in both children and adults were the most common objects of healing (for children 31 per cent, for adults 25 per cent). See Laes (2011b: 42–43).

⁹⁰ See Laes (2011b: 59 n. 47). Gregory of Tours, *Life of Martin* 2.47 (loner on the cart); 3.15 (Gundulfus); *Glory of the Confessors* 79 (knees and arms).

⁹¹ See Laes (2011b: 47). Gregory of Tours, *Life of Martin* 3.58 (on the young shepherd); 2.46 (the abandoned boy).

The most intriguing story is undoubtedly the apocryphal story about St Petronilla, the daughter of Peter, who became paralysed on one side when she was ten years old. Her father had chosen not to heal her, in order to preserve her chastity. To bystanders who grumbled that he could heal everyone except his own daughter, he presented decisive proof. He made Petronilla walk again, but immediately returned her to her previous state. Before that time, a certain Ptolemy, who wished to marry her, had abducted her when her parents had rejected his proposal. When Peter prayed for his daughter's rescue, God had paralysed her on one side. Ptolemy returned Petronilla to her parents' home and was converted because of the miracle.⁹² This story, which appears drastic and shocking to modern eyes, brings us once again to the question of whether Christianity in one way or another could have changed the perception of the defective, suffering body. The cult and ideal of the martyrs, which was passed down through the education of young Christians beginning in the fourth century, could also have had an influence in this regard.⁹³ For other periods, historians have pointed to similar factors. Medievalists have referred to an important shift in the fourteenth century, particularly after the Black Death, the plague that erupted in 1347. The mutilated body suddenly received special attention: movements such as flagellantism were widely known, and the suffering Christ was explicitly reflected in art. Discussions arose: whose true suffering had earned them eternal salvation, and who were the 'false' sufferers?⁹⁴ The extent to which such extreme interpretations affected the everyday lives or the general perception of people with disabilities is even less clear. A simple statement by Jerome might be more relevant. He recounts how heartbroken parents would bring their crippled and deformed daughters to convents because they were unable to find husbands for them. We can even occasionally read about a 'disabled' boy who was brought to a monastery: a boy with leprosy, whose outward appearance had brought scandal to his father, who held the important office of governor.⁹⁵

⁹² The apocryphal account is known from the Coptic *Papyrus Berlin* 8502. See Kelley (2009: 216–217). The text is accessible through The Acts of Peter, in *Écrits apocryphes* i, pp. 1049–1052 (Poupon). Augustine refers to the story in *Contra Adimantum* 17.5 (PL 42.161). See Solevåg (2017).

⁹³ Horn (2009b).

⁹⁴ Metzler (2006: 166–170) treats this period as a possible turning point for the disability history of the Middle Ages.

⁹⁵ Jerome, *Epistles* 130, 6 (daughters). The account of the boy with leprosy in Coquin (1975: 174–175) (Coptic, seventh century). In this regard, see Gascoü (2005: 285).

Conclusions

‘Planet Antiquity’: this is the title of an essay by Toon Van Houdt on presentation and self-determination in classical studies. Very recently, Manfred Horstmanshoff has written about the recognition and alienation that accompany the study of antiquity and the classical languages. To him, the history of disability and people with disabilities makes us confront our own norms and values.¹

The image sketched by Van Houdt calls to mind associations with space travel, and experiences of the alien are part of the perceptions of empathetic travellers. The metaphor of the journey is thus also particularly well suited for the closing thoughts of this book. This is not only because the readings that have been presented resemble a journey through time, confronting us with practices and attitudes that seem at times very close and yet at others very far away – some touchingly familiar, but most harsh or shocking in their difference. It is also because explorers throughout history have always discovered that there is something that binds people together across countries and time. The fact that we all have bodies and limbs, and that the body can present us with both untold pleasures and fundamental problems, is a basic experience in initial contacts between cultures.² In this book, the material facts of our embodied condition are thus taken quite seriously. Finally, at some point, all travellers have felt that their observations are constantly coloured by the lenses of their own cultures and experiences.

In contemporary interpretations regarding disabilities, diagnoses, statistics and categorisations constitute the lenses through which we observe. This is not to say that in our Western world ‘disability’ is an unambiguous and nearly exact scientific concept. Mechanisms of power or manipulation,

¹ Van Houdt (2003–2004); Horstmanshoff (2013).

² Van Brakel (1998a) and (1998b), his basic works on the vast domain of intercultural communication.

subtle shifts in language usage and discourse and representations in the media and the arts all must be taken into consideration. The dominance of the medical model should never be the *a priori* starting point for a serious study.

Nevertheless, in the attempt to determine whether an individual belongs to a particular category (our thinking in subdivisions is significant in itself), we often proceed from medical-psychological checklists or questionnaires. Individuals' scores on these scales determine whether they are eligible for special treatment – legal, social and medical. Integration within society is increasingly becoming an objective in this regard, such that categorisation need not imply exclusion. Moreover, the new media are helping to bring together people with disabilities. Countless interest groups have found each other on the internet. This has facilitated the exchange of experiences and feelings, as well as the fight for common interests.

The fact that the Romans did not operate according to such categorisations has been established in the [Introduction](#) and supported in the various chapters. For the closing thoughts, I therefore invite the reader to view disabilities and defects in the Roman Empire as vague and shifting terms and concepts that have, at least to some extent, escaped any strict categorisation. Depending upon circumstances, a particular defect could be viewed and interpreted in many different ways. To continue with the image of a journey: I would like to invite my passengers to exchange their baggage for local attire, to look through different lenses and to immerse themselves as deeply as possible in an alien world. Nevertheless, this should all be done in the knowledge that – like the people whom they encounter along the way – they still require clothing and material protection, they must still wear lenses and they must still live life.

Functioning and Labour

How is one to evaluate health and nutrition in the Roman world? Earlier research tended to offer a pessimistic view of the matter for much of the pre-industrial population. According to some estimates, before the French Revolution about 20 per cent of the French population were unable to do a full day's work due to malnutrition.³ There is, however, debate about these issues. While we may reject as too optimistic Geoffrey Kron's view of the population of the classical world as being the most well nourished of all pre-modern societies, the actual truth probably lies somewhere between

³ E.g. Fogel (2004) and Clark (2007). See Saller (2012: 72) for the example of the French population.

the two extremes. In particular Kristina Killgrove has offered a more balanced view and warned against the methodological shortcomings that distort the outcomes of some earlier research.⁴ Still, the circumstances causing at least a part of the male adult population to be unfit for work would have had unmistakable implications for the involvement of Roman women and children in the labour force.⁵ For the vast majority of the population, it was necessary to involve everyone as much as possible – even those for whom physical and/or mental conditions made such involvement more difficult. Standing on the sidelines was not an option. The ‘community concept’ that Lynn Rose selected as a guide for studying disabilities in the ancient Greek world remains relevant in this account, even though it is somewhat more statistical and economic in nature.

Ancient writers were obviously not concerned with such facts. The integration of people with disabilities is mentioned only incidentally, as in a passage from the *Historia Augusta* about Alexandria, in which we read that everyone in this cosmopolitan city had a job. Even those suffering from gout, eunuchs and blind people had their own tasks. Even those whose hands were of no use to them could contribute. Although the focus of this text is obviously not the same as ours (the author wishes to emphasise that money is the only god in Alexandria, where everyone is driven by a profit motive), the fragment remains a unique testimony to the involvement of disabled people in the labour force.⁶

This brings us directly to the question of whether ancient writers considered the inability to participate in the labour force as a separate category of disability. To be sure, even the term ‘labour’ cannot in general simply be superimposed on the ancient Roman world. For ancient jurists, slaves did not ‘work’ – they merely did what their masters had ordered them to do.⁷ On a more practical and day-to-day level, however, the ancients understood that afflictions prevented some people from performing certain tasks. This interpretation comes very close to our concept of functional impairments. Galen defines disease (referring to a temporary state) as follows:

Disease is to be defined as a certain condition that is not in conformity with nature, and which therefore impairs functioning. (Galen, *De methodo medendi* 2.5 [10.110–11 Kühn])

⁴ Kron (2005); Killgrove (2010). ⁵ Saller (2012: 72).

⁶ *Historia Augusta* (*Firmus Saturninus Proculus et Bonosus*) 8. I am grateful to Bert Gevaert for this reference. See also Grassl (1989).

⁷ Thomas (2002).

Conversely, he defines health as follows:

Suffering no pain and not being hindered in our daily activities – this is what we refer to as health. (Galen, *De sanitate tuenda* 1.5 [6.18 Kühn])⁸

It is interesting to compare this with a passage from the *Digest*:

It should be noted that disease [*morbis*] is defined by Sabinus to be some condition of the body which renders it less able to perform the functions for which Nature has bestowed upon us corporeal health. In some cases, disease affects the entire body, in others only a portion of the same, for instance a cold or a fever is a malady of the entire body; blindness, for example, is the malady of a part, although a man may be born in this condition. There is a great difference between a defect [*vitium*] and a disease, as where someone is a stammerer [*balbus*], for this is rather a blemish than a state of ill-health. (*Digest* 21.1.1.7 Ulpian; trans. S. P. Scott)

Ulpian's comments here are in reference to a legal question involving the sale of slaves. His categories are clearly not the same as our own. To think that the legal contrast between *morbis* and *vitium* corresponds to our distinctions between disease and defect or disability is to be sadly deceived. Even congenital blindness is classified as a disease by the jurist. On this definition, functioning and the ability to work are the only standards. In the case of disease, such functioning is hindered to some extent, whether for a shorter or a longer period. Blind slaves could not simply be assigned to any purpose whatever, just as those with severe flu infections were temporarily incapacitated. Stutterers were much less problematic. The passage is reminiscent of a fragment by Gellius, which states that a disease could give cause for cancelling the sale of a slave, while the matter could be disputed in the case of a defect (cf. above pp. 9–10). We have encountered legal definitions in nearly every chapter. Most refer exclusively to disputes concerning the sale of slaves. In all cases, functioning is the central issue.

The exemption from capitation taxes and the provision of state support due to a defect offers the possibility of recognising a separate category. We know that in Classical Athens citizens who were classified as *adunatoi* ('weak') were eligible for benefit payments from the state. The practice declined with the disappearance of the Classical *polis* in the Hellenistic period.⁹ The practice of exemption is known only from the papyri of Graeco-Roman Egypt. The right to exemption probably required proof

⁸ See also Galen, *De symptomatum differentiis* 1 (7.43 Kühn). I am grateful to Manfred Horstmannshoff and Lieve Van Hoof for these passages.

⁹ Dillon (1995) provides a complete status quaestionis. Fischer (2012) discusses Lysias, Orations 24 without referring to the basic work by Dillon.

through *epikrisis*, an inspection of the body. For example, a certain Satabous was exempted because he was paralysed in his right leg. The weaver Tryphon was exempted because his vision was so poor due to cataracts. The Roman lady Ulpia Heroïs filed a complaint with the *eirenophylax* of Theadelphia because, in violation of the law, an official attempted to collect taxes from a crippled person whom she was supporting.¹⁰

The military environment may also have specified a separate group of soldiers who could no longer function. According to Isidorus of Seville, military rosters included Greek letters after the names of individual soldiers to indicate their status. The letter tau stood for ‘surviving’ (in the sense of ‘injured, but still fit for combat’). The letter theta indicated death. The letter lambda was used to indicate those who were no longer fit for combat.¹¹ Members of the Roman army had access to good accommodation in the form of army hospitals (*valetudinaria*) and physicians who accompanied the legions. It could be that the ‘unfit’ soldiers about whom Isidorus writes were war veterans who were no longer able to serve following a severe injury or amputation.¹² Legal sources from the fourth century refer to sons of veterans or army officers who were unfit to serve in the army due to various types of weakness. They were required to enter the city council, thereby joining the ranks of the local nobility. Some were so cowardly that they would feign unfitness for the army by having one of their fingers cut off. These individuals were also obliged to assume duties on the city council. Were boys from wealthy families who were deemed unfit for military service (*inhabilis militiae*), for whatever reason, regarded as a separate category?¹³

¹⁰ SB v.8025 (AD 91–92) on Satabous; *P. Oxy.* i.39 (AD 52) on Tryphon; SB v.9105 (AD 198?) on Ulpia Heroïs. For these and other examples, see Arzt-Grabner (2012: 5051).

¹¹ Isidore of Seville, *Etymologies* 1.24. See Oliver (1957), who interprets the tau as *trotheis* (‘injured’) and the lambda as *lobetheis* (‘disfigured’). Oliver (1957: 243) rightly proposes changing the reading *inperitiam* (‘inexperience’) to *ineptiam* (‘ineptness’). The reference to inexperienced (underage?) soldiers would indeed seem odd in a list of functioning soldiers.

¹² On ancient military medicine and medical personnel, see Salazar (2000: 68–83). About military hospitals and the context of the ancient hospital, see Laes (2009). Seneca, *De tranquillitate animae* 4.5 mentions a soldier who had lost his hands in battle but who nevertheless finds a way to fight. This account refers to courage during the actual battle, and not to what happens to such soldiers later. See also Van Lommel (2013b).

¹³ *Codex of Theodosius* 7.22.5 (*invalidi et imbecilli*); *Codex of Theodosius* 7.22.1 (the amputation of fingers rendered them *ad militiam inutiles*). See Wierschowski (1995) on refusal of military service. In *Digest* 49.16.4.12 (Menenius) we read about a father who had ‘weakened’ (*debilitavit*) his son, thus rendering him *inhabilis militiae*. In Frontinus, *Strategems* 4.6.4, we read that a young man from a well-off family had received a high military post because his family was in dire financial straits. Because the boy was *inhabilis militiae*, the emperor granted him an honourable discharge.

What was the situation for the average member of the population who was forced to earn a living in the day-to-day struggle for life? He or she surely did not lose sleep worrying about subtle definitions. Involvement in the labour force was a necessity, pure and simple. Although such situations are mentioned only rarely in the sources, we can easily imagine how it must have been. People who were blind or who had visual impairments were able to perform many tasks within their own familiar environments. In a primarily agrarian society, deaf people, mute people, those with speech defects and those with mild intellectual disabilities faced no fundamental obstacles to performing labour. The papyri and the osteological findings also provide evidence that mobility impairments in various degrees did not stand in the way of performing heavy physical tasks (whether or not they were accompanied by pain). In many cases it is the Christian miracle stories, with their eye for detail, that provide us with a sketch of a world that existed even before Christianity: the involvement of people with disabilities was perfectly normal. In some rare instances even non-Christian writers offer excellent insights. Aretaeus of Cappadocia tells of a skilled joiner. In his workshop he could work with the best, he had outstanding contacts with his workers, and he had no trouble negotiating with them. As soon as he went outside, however, whether to go to the market, the bath-house or for any other activity, the problems would begin. He would leave, mumbling and shrugging his shoulders, and would go completely out of his mind. As soon as he returned to his studio, he would return to his senses. From an economic standpoint, one would hardly regard such a master joiner as having a disability.¹⁴

Capabilities and the Happiness Index: Exclusion or Inclusion?

Compared with men, the biological reality of being a woman involves inherent disabilities. Pregnancy and menstruation can remove a woman from working life for relatively long periods. In societies whose laws and regulations do not consider the female nature (e.g. by including provisions for maternity and/or lactation leave, offering paternal leave), being a woman can involve fundamental restrictions. To be somewhat provocative, we could claim that women in such societies are more 'disabled' than are those who are 'by nature' (i.e. from birth) lame but living in a society where opportunities for wheelchair-users have been optimised. In a certain sense, could physically fit homosexuals in cultures that punish the experience of

¹⁴ Aretaeus, *De causis et signis diuturnorum morborum* 1.6.6. See Stok (1996: 2322).

same-sex sexuality with death be regarded as more ‘disabled’ than their blind fellow citizens who are surrounded by the best of care? A list of such examples could easily be accumulated. It is a prime issue addressed by the prominent American philosopher Martha Nussbaum (born 1947). In her political thinking, she often notes that current contract theories (e.g. the one developed by John Rawls concerning the expansion of a just society) too often assume agreements between partners who are physically and intellectually equal. Many also draw upon a Kantian concept of the person, which assumes that individuals are able to make their own moral choices. In other words, the theories do not give adequate consideration to the ways in which we can live with people with disabilities and how we can allow them to develop their full potential. Nussbaum proposes a list of ten absolute minimum criteria, capabilities that every state should provide for its citizens:

1. The right to life
2. Physical health, and the possibility of being cared for when not healthy
3. The right to physical integrity
4. The right to the use of the senses, imagination and freedom of thought
5. Experiencing emotions
6. The development of practical reason (reflecting on one’s own life plan)
7. Social contacts and affiliations
8. Respectful contact with nature, plants and animals
9. The possibility of play, amusement, recreation
10. Political and material participation in one’s own surroundings (the right to material possessions, political rights).

In another book I have referred to the fundamental importance of Nussbaum’s views to those wishing to develop a well-balanced sociocultural history without degenerating into anachronistic moralising. The debate concerning the universality of human rights and the manner in which they should be enforced is immense.¹⁵ For Nussbaum, however, it is clear: anyone who is in any way seriously hindered from experiencing one of these capabilities is to some extent ‘disabled’. It is a valuable mental exercise to apply the list to the inhabitants of the Roman Empire. Although few Romans are likely to earn a good score, the results for slaves and poor people are likely to be miserable. And what could be said of

¹⁵ Laes (2011a: 19–21). The following thoughts go back to Nussbaum (2006) and (2011).

women or illegitimate children in aristocratic families? From this perspective, individuals whom we would automatically regard as disabled would comprise only a small share of a large group of people with disabilities in ancient Rome. But some would hardly belong there. The well-cared-for blind philosopher Diodotus in the home of Cicero was much less disabled than were the deformed beggars encountered in the poems of Martial. Background and/or social class are key concepts in this regard.

The Happiness Index

Closely related to Nussbaum's approach is the World Happiness Report, which was published in 2012 under the auspices of the United Nations.¹⁶ The list of 'evaluative happiness' (how people rate themselves as happy or unhappy) reveals large regional differences. The following parameters are used: material prosperity and standard of living, education, health, ecology, well-functioning government, use of time, cultural diversity, social circumstances and psychological well-being. In the report we read that people with long-term disabilities usually declare themselves to be less happy, although the extent of their disability and the manner in which their society permits them to function can either mitigate or reinforce feelings of unhappiness. Mental disorders are mentioned as being particularly disabling throughout the world, in developing countries as well as in the industrialised world. Despite some difficulties in classification, the report regards mental health problems as the most commonly occurring affliction in the entire world. In hard figures, it seems as if the impact of a severe disability amounts to a variation of 0.6 on a scale ranging from one to seven with regard to the perception of happiness. A moderate disability means a variation of 0.4 on the same scale. It is important to note that those who have lived with disabilities for longer periods tend to adapt better and feel happier than those who have only recently been affected by disabilities.¹⁷

Nearly all the data in this report are derived from surveys and questionnaires. For antiquity, we must do without such documents and in this book we have heard very little from people with disabilities themselves. Where such has occurred at all, it has been in the form of petitions on papyrus, in which those involved had every reason to emphasise their

¹⁶ I am grateful to Katelijnn Vandorpe for this reference and suggestion. The report is available for consultation at <http://worldhappiness.report/>.

¹⁷ See the World Happiness Report, (2017): p. 20 (unhappiness); pp. 74–75 (mental afflictions); p. 77 (adaptation).

misery in order to receive compensation. We can regret the lack of first-person documents, or we may comfort ourselves by noting the subjective-deceptive character of what people reveal about themselves in interviews and questionnaires. The entire design of the happiness index has obviously been subject to criticism. Nevertheless, this book is not based on strongly relativistic opinions about the subject of disabilities. In this respect, I believe that the globally designed World Happiness Report can indeed tell us something about the possible perceptions and experiences of people with disabilities in ancient times. For example, feelings of unhappiness could have been softened or partially eliminated by almost complete integration into agricultural or other types of activities.

In addition, the happiness perceptions of ‘disabled’ aristocrats who had small armies of service personnel were likely to have differed from those of people forced to manage in impoverished circumstances. In sum, the application of the happiness index to societies from the past is a difficult mental experiment. But after all, a combination of comprehensive academic research, sensitivity to cultural context and attention to the constancy of human nature over time makes the basis of any type of historical enquiry.¹⁸ It should definitely be noted that this mental exercise does anything but confirm the existence of a separate group of people with disabilities in ancient society.

Monsters and Anti-Physiognomics: A Path to Identity Formation?

In the [Introduction](#) we referred to the problem of defining ‘monsters’. Teratology (the study of monsters) was a particularly elaborate discipline in antiquity (and later, extending to the cabinets of curiosities of the twentieth century).¹⁹

For readers who can never get enough of human exotica, the encyclopaedia of Pliny the Elder is a true gold mine. In his ancient *Guinness Book of Records*, he addresses a broad array of bizarre curiosities in individual people: of multiple births, body length, strength, persistence, vision, hearing, memory, happiness, advanced age and much more. He clearly distinguishes these cases, however, from the ‘Plinian races’ (a term that was not coined by

¹⁸ I owe this thought to Keith Bradley, to whom I am most grateful for personal correspondence on the matter, in the light of a forthcoming publication.

¹⁹ Of the extensive literature on antiquity, I mention here only Lenfant (1999); Atherton (2000); Chappuis Sandoz (2008); Charlier (2008); Gevaert and Laes (2013).

Pliny). The individual curiosities did not turn people into ‘monsters’. About the grandfather of Crassus, who had never laughed in his lifetime, we read that such a temperament takes away almost all human feeling. We do not read that Crassus’ grandfather was not a human being.²⁰

We can distinguish three types within the curious races.²¹ One group was half human and half animal: sirens, hippocentaurs and cynocephali (humans with the heads of dogs). A second group was distinguished by a remarkable body part. *Sciapodes* had only one foot, which they used as a sunshade; *antipodes* had reversed feet; *astomi* had no mouths and *monophthalmi* had but one eye. A third group was completely different from the ordinary human standard: Pygmies because of the abnormally small build, Amazons because of their reclusive life and their single breasts, cannibals because they ate human flesh. For a modern reader, it seems clear: such monster races could not possibly exist, and that is why Pliny set them apart – but this would be an anachronistic approach. For Pliny and other Roman intellectuals, these exotic types did indeed exist (just as Marco Polo had seen monster races during his travels). The factor that distinguished the races from individual cases was heredity. For parents of these races, their babies were not ‘monsters’. On the contrary, they were confirmation of that which had always existed amongst their people.²²

Physicians and historians have often been tempted to discover disabilities within these races. For example, the Blemmyes from Ethiopia, people who had no heads, with a mouth and eyes on their chests, refer to the fear and fascination with the birth of a foetus with anencephaly. The *hippopedes*, with their horse legs, were a projection of a deformity of the foot. The canine-headed cynocephali were probably people with exaggerated hair growth or hirsutism. Pygmies were evidently a reflection of dwarfism. Although this is an amusing mental exercise, it is not much more than that.²³

In this case as well, however, there is the possibility of identity formation. In the work of the Latin poet Statius, we read an extensive account of the

²⁰ Pliny the Elder, *Natural History* 7.33–215 contains a long list of personal ‘records’. On Crassus, see *Natural History* 7.79.

²¹ Pliny the Elder, *Natural History* 6.46–52 and 7.6–32. These divisions are not made by Pliny himself, but rather are a construct by twentieth-century scholars. See Gevaert and Laes (2013: 218).

²² Cuny-Le Callet (2005: 165–185) analyses a long series of texts by Roman intellectuals on the existence (or non-existence) of monsters. See Gevaert and Laes (2013: 221) on races. Garland (2010: 159–177) has previously addressed ‘racial deformity’. Physiognomy takes a prominent position in the work of Isaac (2004).

²³ Garland (2010: 141–158) presents many examples of such ‘reconstructions’. See Charlier (2008) for a physician who is still conducting retrospective diagnoses for the monster races. Other examples of such fanciful reconstructions in Gevaert and Laes (2013: 223–224).

greatest and most exotic games that the Emperor Domitian had allowed to take place in the new Amphitheatrum Flavium (otherwise known today as the Colosseum). One of the acts was the fight between the Pygmies and the cranes. For this, the emperor used real dwarves. The confusion between people with nanism and mythical Pygmies is also found in other places in ancient literature.²⁴ The freakish Emperor Elagabalus owned an entire troupe of *monstra*, including dwarves and ‘morons’ (*moriones*). His successor, Alexander Severus, wished to disband the bizarre gang. Some were donated to the citizens as entertainers, while others were assigned to various cities in order to prevent them from stalking a single city as a horde of aimless beggars.²⁵ Although we know next to nothing about identity formation amongst minority groups in ancient times, we cannot exclude the possibility that we are confronted with two intriguing cases in this context. Might the small army of dwarf actors have identified with the Pygmy people that they represented, in this respect feeling ‘different’? Might the large group of Elagabalus’ former entertainers have thought of themselves as different, due to their appearance and common background? Conversely, might the Romans, who were familiar with stories about monster races, have considered people with particular defects as belonging to that ‘sort’? We need only recall the mocking or insulting connotation that the name ‘Cyclops’ had acquired for Philip of Macedonia.²⁶

Ancient physiognomics have frequently been addressed in the various chapters of this book. According to this pseudo-science, which continues to be rehabilitated and recycled in revised form to this very day,²⁷ the inner state of individuals can be explained in terms of their outward features. In the often technical physiognomic treatises, a type of ‘obtuse human’ (*anaisthētos*) developed: fleshy and sturdy neck and legs, fat hips, raised shoulder blades, a large, round and fleshy chest, pale and obtuse eyes, thick nose, unusual distance from the neck to the breastbone and from the breastbone to the navel and so on. In Imperial times physiognomy was especially popular, to a large extent as a form of soothsaying – palm-reading was a direct extension of it.²⁸ Once again,

²⁴ Statius, *Silvae* 1.6.57–64. See Gevaert and Laes (2013: 225). According to Strabo, *Geography* 17.2.1, the Pygmies were an invention, based on observations of people with dwarfism. On dwarves in ancient Rome, see Dasen (1993), (2006) and (2008); Weiler (1995); Wyns (2011).

²⁵ *Historia Augusta* (Alexander Severus) 34.2. ²⁶ Suggestion in Gevaert and Laes (2013: 219).

²⁷ See Van Houdt (2011) for the continuity of ancient physiognomics in the nineteenth and twentieth centuries.

²⁸ Laes (1997) and Van Houdt (2000) offer a general introduction to ancient physiognomics. Evans (1969) remains a standard contribution.

this raises the question of whether this pseudo-science equipped its practitioners to pathologise certain people according to their appearance, and thus to write them off as 'deviant' cases. Such 'anti-physiognomic' expressions can be found primarily in the literary sources, in which authors devote themselves to the thorough denigration of an opponent (Thersites in Homer remains the stereotypical example). This context has to do with an elite that was seeking a social status quo and that used physiognomic prejudice in a random and largely ad hoc manner. For those who did not belong, something was always apparent in their appearance. In the case of emperors who were perceived post factum as 'bad', biographers had access to an entire physiognomic arsenal that enabled them to prove how the monarch's degeneration had also been reflected in his physical features.²⁹ The group of people who took such a physiognomic beating undoubtedly extended far beyond our group of people with disabilities. Nevertheless, we cannot rule out the possibility that physiognomic prejudice occasionally played a role in the evaluation of fellow humans with disabilities.³⁰

Disabilities as Political Invective: Despised as a War Hero and Reviled as a Politician

Marcus Sergius Silus was a veteran of the Second Punic War. In one of Rome's more difficult periods, military success alternated with defeat at the hands of Hannibal. In 197 BC Sergius became praetor. The war had just ended, and we can imagine that a great number of men in Rome still bore clear traces of the struggle:

In his second campaign he lost his right hand; and in two campaigns he was wounded three and twenty times; so much so, that he could scarcely use either his hands or his feet; still, attended by a single slave, he afterwards served in many campaigns, though but an invalided soldier. He was twice taken prisoner by Hannibal (for it was with no ordinary enemy that he would engage) and twice did he escape from his captivity, after having been kept, without a single day's intermission, in chains and fetters for twenty months. On four occasions he fought with his left hand alone, two horses being slain under him. He had a right hand made of iron, and attached to the stump, after which he fought a battle, and raised the siege of Cremona,

²⁹ On biography of emperors and physiognomics, cf. above p. 39.

³⁰ Weiler (2004a and b) and (2012) provides detailed discussion of anti-physiognomics, and does not rule out the possibility that people with pathologies lay behind such descriptions. A radical rejection of this thesis is presented in Goodey and Rose (2013). One example of a text on *anaisthētos* is Pseudo-Aristotle, *Physiognomonica* 812a5–7. See Weiler (2012: 21). Garland (2010: 87–104) also addresses physiognomical consciousness within the framework of disabilities.

defended Placentia, and took twelve of the enemy's camps in Gaul. All this we learn from an oration of his, which he delivered when, in his praetorship, his colleagues attempted to exclude him from the sacred rites, on the ground of his infirmities. What heaps upon heaps of crowns would he have piled up, if he had only had other enemies! . . . Other persons have been conquerors of men, no doubt, but Sergius conquered even Fortune herself. (Pliny the Elder, *Natural History* 7.104–106; trans. H. T. Riley)

This text offers one of the few pieces of evidence for ancient prosthetics, as mentioned earlier (cf. above p. 160). Of particular interest for our purposes are the exceptional circumstances of Sergius' term as praetor. His political opponents apparently considered it unseemly for him to participate in the sacred rites. One must wonder why. The mere presence of invalids or people with disabilities at religious ceremonies was not always considered inappropriate. Particularly in the period following the Second Punic War it was highly likely that at least one such person would have been present in the Roman audience. Sergius had not been excluded from the office of praetor because of his appearance; only his performance of sacrifices appears to have been problematic. To be sure, his practical duties as praetor were likely to have been limited: priests or servants carried out the largest share of the sacrifices. Perhaps the absence of a right hand was regarded as a bad omen. Given the negative cultural and religious connotations of the concept of left, we cannot rule out the possibility that sinistrality was regarded as a defect under certain conditions.³¹ Nevertheless, invalidity was not necessarily an obstacle to fulfilling the office of priest. The physical perfection of the servant was at most an ideal, which was set aside in day-to-day practice.³² In the case of Sergius, the insinuations and ad hoc accusations of envious colleagues during a time of political difficulties may have played a role. His alarming appearance would thus have provided an excellent pretext. We are not told how all this ended for Sergius. It is nevertheless certain that he was not required to resign as praetor. His prominent social background undoubtedly worked to his advantage. How different must have been the reality of the Greek war veterans who were maimed beyond recognition by the Persians and who did not wish to return to Greece, as their wives would either not recognise them or feel only repulsion towards them. We also read how Caesar would order his men to aim especially for the faces of Pompey's

³¹ Humer (2006) and (2012).

³² Baroin (2010: 60–63). See the previously mentioned cases of the stuttering Metellus (cf. above p. 138–139) or the blind Jewish rabbi (cf. p. 101).

cavalry, such that the young warriors would shy away from the danger and shame that they would face in the future. Such rare accounts expose a reality of misery: war veterans who were not of high birth or status were possibly partially segregated within society.³³

In the tradition of unrestrained personal mockery and invective, the Romans could also be merciless to political opponents with congenital or other physical defects. Cicero notes with contempt how the *homo novus* Publius Vatinius suffered from glandular tumours or goitres that disfigured his entire body, particularly those on the neck and face. In his speech against Vatinius Cicero did not hesitate to exploit his hideous appearance. He also mocked Vatinius' slow stride, which was due to gout. At one point, the unfortunate man tried to report that he had walked 2000 steps (about 3.5 kilometres). 'Yes', said Cicero, 'for the days are longer'.³⁴ With little delicacy, Cicero referred to his opponent as 'a *tumid* orator'. Such merciless humour often contained a physiognomic component. At one point Cicero was forced to think long and hard about a request from Vatinius, who reproached him for his inertia. 'I also do not have a neck like yours,' retorted Cicero. It should be noted that a thick neck was seen as a symbol of disobedience against legal authority.³⁵ Later writers give undisguised accounts of how Vatinius' physical ugliness was equalled by his moral depravity. Seneca refers to Vatinius as 'a man born to be laughed at and hated', not failing to note his ability to counter these judgements with self-ridicule: what better revenge on hecklers than to show that their remarks have no effect on you at all?³⁶ If we are to believe the late antique tradition, Vatinius came under even heavier attack. Macrobius tells us about popular mockery or hatred directed towards Vatinius. During the gladiatorial games that he had organised, people had thrown stones at him. Vatinius received word from the aediles that no one was allowed to throw anything towards the arena, unless it was an apple. Someone asked the quaestor Cascellius whether he could throw a pine cone, to which Cascellius replied, 'Anything you throw at Vatinius is an apple.' The throwing of stones may remind us of the stories about the treatment of people with intellectual disabilities

³³ Curtius Rufus, *History of Alexander* 5.5.10–16; Plutarch, *Caesar* 45.2–4. See Salazar (2000: 35).

³⁴ Cicero, *Against Vatinius* 4 and 39 (goitre) (trans. H. E. Butler); Quintilian, *The Education of an Orator* 6.3.77 (Cicero on Vatinius' gout); Velleius Paterculus, *Roman History* 2.69.3 (moral depravity); Seneca, *De constantia sapientis* 17.3. See Baroin (2010: 59–60).

³⁵ Plutarch, *Cicero* 9 (neck) and 26 (tumid orator). On swollen necks and disobedience to authority, Cicero, *Against Verres* 2.3.135 and Seneca the Elder, *Controversiae* 3.16.

³⁶ Velleius Paterculus, *Roman History* 2.69.3 (moral depravity); Seneca, *De constantia sapientis* 17.3; trans. A. Stewart.

(cf. above p. 51), although Macrobius never explicitly states that such actions were due to Vatinius' appearance.³⁷ In any case, physical defects did not stand in the way of a successful political career. In 55 BC Vatinius became a praetor, with the explicit support of the triumvirs Pompey and Crassus. In the turbulent year 47 BC, Caesar rewarded him with the office of consul and in the same year he was admitted to the college of augurs. He was also a renowned warlord, whose soldiers had hailed him as Imperator and who was granted a triumph in 43 BC.³⁸ Despite having to endure what we would see as highly politically incorrect humour, Vatinius' defects cannot be seen to have excluded him from public life. Honour and reputation appear to be the central factors in the entire issue of political invective.³⁹ For the Romans, might intellectual and/or physical integrity have been a necessary condition for honour and reputation (*honor* and *fama*)? In the sources, are disabilities (or people with disabilities) explicitly linked to shamefulness and disgrace (*turpitude* or *infamia*)? In order to answer this question, we can (and should) consider approaching it from the opposite direction. Rather than tracing and discussing specific disabilities, we should conduct a thorough sociocultural historical analysis of the Roman understanding of the concept of integrity (*integritas*). Did this category also and always encompass the possession of an 'intact' body? The same question concerns the connection between beauty (*decus*) and honour (*decor*). Were 'ugly' people invariably relegated to the broader category of 'infamous' people? Such questions partly exceed the framework of this book. Based on the cases we have examined, however, it appears that it was often an ad hoc issue. To be sure, physical disabilities were occasionally cited in order to discredit opponents. Nevertheless, in a world in which 'perfect'/'integral' bodies and forms were necessarily rare for material reasons, large numbers of imperfections must have been overlooked. At other times, the same defects could be used to confirm or reinforce a person's fame. The war veteran is an outstanding example of this.

Basic Positions

Were there certain positions and attitudes that typified Roman perceptions of people with disabilities across the centuries? This question is quite difficult to answer, as it requires painting with broad brush strokes, without considering any social, geographic or even chronological shifts.

³⁷ Macrobius, *Saturnalia* 2.6.1.

³⁸ See Corbeill (1996: 46–56) and Baroin (2010: 59–60) on Vatinius' career, defects and ridicule.

³⁹ With regard to this passage, I am grateful for the critical remarks of Toon Van Houdt.

The question also confronts us with the very possibility of a history of ugliness or beauty across the centuries. Evolutionary psychologists claim that such concepts are not determined entirely by culture, but the cultural philosopher Umberto Eco has written a two-volume history of beauty and ugliness in Western art.⁴⁰ For the Graeco-Roman world, Robert Garland has ventured into a similarly 'broad' history of attitudes.⁴¹

Shame appears to have been a constant in Roman times. It could be expressed on several different levels. For aristocrats, the concept was inextricably tied to honour and reputation, but much less strongly related to the psychological dimension that it possesses in our world.⁴² For example, Cicero explicitly states that many people do everything they can to keep deformities, disabilities or the mutilation of their members concealed from the outside world.⁴³ We encountered such a position in the reaction of Claudius' parents during the childhood of their 'odd' son. The file on intellectual disabilities has yielded several cases of confinement to the home. For Croesus his deaf-mute child did not count as a full son. In the year 375, the Church Father Basil of Caesarea wrote that the mothers of 'monsters' (*terata*) were so ashamed of the congenital defects of their children that they would hide them away in the dark. A Syrian apocryphal text tells of the paralytic princess Phratia, who was confined to the home and whose family would never take her along to parties or festivals for fear of embarrassment. When she was alone, she was healed by the apostle Andrew. Her healing brought about an immediate conversion and a break with her family.⁴⁴ The concealment of children with disabilities in the home occurs in our world as well, often in areas in which there is no institutionalised care. Anthropologists have noted that such solutions do not exclude the possibility of loving attention and care.⁴⁵

Shame can be related to the belief that the disability in question is a punishment for an error committed by the parents or ancestors, or for an

⁴⁰ See Pinker (2003: 49) on mental responses that can remain the same across various cultures and times: 'The stimuli and responses may differ, but the mental states are the same, whether or not they are perfectly labeled by words in our language.' See Eco (2004) and (2007) for the history of beauty and ugliness.

⁴¹ Garland (2010: 73–86) focuses primarily on the element of mockery.

⁴² See the fundamental studies by Barton (2002) and Kaster (1997).

⁴³ Cicero, *De finibus* 5.17. I am grateful to Bert Gevaert for this reference.

⁴⁴ Basilius, *Epistles* 210.5; Acta Mar Mari 12 (ed. Jullien and Jullien, *Les actes de Mar Mari* 23 [Syriac] and 28 [French]), as cited in Horn (2009a: 193–194).

⁴⁵ Jones and Webster (2010: 14–15) mention Thailand, Ghana, Kazakhstan, Kenya, the Balkan and the Philippines, amongst other examples.

individual's own mistakes. Such beliefs go as far back as ancient Greek thought. Poets as early as Hesiod suggest that children with defects would be born if their parents had deceived the gods or broken an oath.⁴⁶ Many of the stories of Herodotus cited here relate to punishment or a type of cosmic justice, which could affect the descendants of a bad person for generations. Was Croesus not a fourth-generation descendant of Gyges, a bodyguard who had killed his king in order to take power on his own? Did the mental degeneration of Cypselus and his son Periander not ultimately have negative effects on their descendants?⁴⁷ Was the insanity of Cleomenes and Cambyzes not due to their own misdeeds? In medical and physiological explanations for the birth of children with disabilities, parental responsibility was occasionally explained in biological terms. In the Hellenistic and Roman periods, blindness, speechlessness, broken bones and lameness were among the favourite curses to be formulated on curse tablets. 'May your wives bring forth children contrary to nature' is a threat found on gravestones in Roman Asia Minor, directed towards those who would desecrate the tombs. In this context, blindness is quite often interpreted as divine punishment.⁴⁸ Although Jesus remarks about the man with congenital blindness that neither he nor his parents had sinned (John 9:2–3), a certain link between sin and disease does exist in the Old Testament and in Jewish thought. Addressing the lame man in Bethesda, Jesus said, 'Now you are well again, do not sin any more, or something worse may happen to you' (John 5:14, *New Jerusalem Bible*). Although certain explanations in the exegetic tradition also continued to defend the causal link between sin and disease, various Church Fathers (e.g. John Chrysostom and Augustine) state strong opposition to it. According to them, disabilities and defects exist in order to allow God's good works to be revealed. They are certainly not the will or the work of God. At a more mundane level, we hear Caesarius of Arles preaching in the sixth century on the dangers of engaging in sex on Sunday: deformed children were an unmistakable sign of the sin that had been committed.⁴⁹

⁴⁶ Hesiod, *Works and Days* 235. See the interpretation of Garland (2010: 59–61).

⁴⁷ Herodotus, *Histories* 5.92e cites a proverb from an oracle: 'That man is fortunate who steps into my house . . . He himself and his children, but not the sons of his sons'; trans. G. Rawlinson.

⁴⁸ SEG XVIII 561 (curse), a rather rhetorical curse, edited and commented upon by Strubbe (1997: 112–116, number 155). See Gager (1992: 21) and Strubbe (1997: xvii–xviii) for a list of 'popular' curses. See also Strubbe 1983.

⁴⁹ On the connection between sin and disease in the Bible and in Christian thought: Ferngren and Amundsen (1996: 2948); Kelley (2009: 210–211). Pseudo-Clement, *Sermons* 19.22.5–8 also observes a connection with sin for the blind man in John 9. Contrast this with the link in Augustine, *On the Gospel of John* 44.9 (PL 35.1713–1719, especially 1713–1714) and John

One of the attitudes hardest to define is the approach to disabilities involving humour. We teach our children from their earliest years not to stare at people with disabilities, and certainly not to laugh at them. Even contemporary humorists avoid making jokes about people with disabilities, although the disabled themselves do not always avoid subtle and/or direct humour about their disabilities. The humour concerning Vatinius and the practice of throwing stones at people with intellectual disabilities is thus enough to make us suspect that the boundaries of political correctness in ancient times were quite different from those we know in contemporary Western society.⁵⁰ Nearly every chapter in this book contains scornful remarks by ancient authors with regard to particular defects. Such remarks are not restricted to literature: the hundreds of figurines of deformed people at least had a sort of humorous function. In many cases, such derision occurred within the context of political invective, as in the descriptions of 'bad emperors'. Writers such as Cicero argued that physical deformities offered exceptional opportunities for ridiculing one's opponents, as long as it was done within certain limits.⁵¹ Such forms of mockery reached a 'high point' in satire and in the genre of the epigram. In Martial's epigrams, we encounter a rich array of people with defects who are heckled mercilessly. They are attacked for their baldness, castration or impotence, deafness, dental problems, dwarfism, eye problems, gout, haemorrhoids, halitosis, hysteria, deformed limbs, mutilation or amputation, intellectual problems, body odour, ugliness, old age – the list goes on and on. It is a challenging exercise to determine where exactly the limits lay for Martial and what motivated his humour. In many cases, his ridicule was not directed so much towards the defect as it was towards the grotesque manner in which an individual tried to conceal that defect. The moral was that people should always cope with their disabilities in a proper manner. His humour also frequently concerns defects for which the individuals themselves are to blame. Aristotle writes that we should not mock people who become blind unless we are certain that their blindness is due to alcohol abuse. Consider contemporary humour in this regard. Fat people and drunken politicians are fair game for the barbs of stand-up comedians. Direct humorous attacks targeting congenital defects are much more problematic.⁵² The extent to which the literary humour of the

Chrysostom, *Sermon on John* 56.1 (p. 59.306). Sex on Sunday: Caesarius of Arles, *Sermones* 44.7. See Boswell (1988: 260).

⁵⁰ Stahl (2011: 723–725). ⁵¹ Cicero, *On the Orator* 2.226; 2.239.

⁵² Gevaert (2012) for an overview of Martial's epigrams on disabilities. The publication is a forerunner of the doctoral dissertation on ugliness and deformity in Martial, defended by Bert Gevaert in 2013.

epigrams reflected a day-to-day reality is quite difficult to say. It also seems unlikely that Christianity did much to alter this reality. Gregory of Tours tells us about a woman in the town of Bourges. She had given birth to a baby who looked more like a monster than a human being. Many looked down on the child with scorn and reproached the mother for the fact that such a monster had emerged from her belly.⁵³ In the apocryphal Acts of Philip we read how the unfortunate daughter of Nicoclides suffered much at the hands of her peers due to her defect.

Another attitude that seems to have been a constant through time is a fascination with strange-looking people. For Rome, we could consider the preferences of emperors and wealthy aristocrats for freakish or exotic slaves. On slave markets, jesters and *moriones* were in high demand.⁵⁴ Fascination with the unusual as such could be regarded as a unifying theme throughout the entire *Natural History* of Pliny the Elder, and one could claim without exaggeration that the fascination displayed by ancient writers towards disabilities played a role in a substantial number of accounts describing defects. The same could be said of the figurines. Such fascination did not decrease with Christianity – quite the contrary. Questions concerning why God had decided to create ‘monsters’ and how they fit into his divine plan became fundamental questions of faith. Augustine tells of a pair of conjoined twins with two heads, who lived long enough to become popular and to attract many spectators.⁵⁵ Anthropologists connect this fascination with magico-religious elements (e.g. the evil eye). In this book we have encountered this belief primarily in the case of Gemellus Horion, whose eye defect was suspected of causing a failed harvest in his Egyptian village.

Fear and fascination are often intimately related to each other. Ancient writers did not hesitate to highlight the sorrowful facets of life with a defect. The emphatic marginalisation of suffering suggests that physical misery was both literally and figuratively a pain for many aristocrats. One example with a highly aristocratic flavour is Aristotle’s statement that ugly men and individuals of low birth cannot be regarded as happy. In a much more ordinary manner, John Chrysostom writes that mothers were

See Aristotle, *Nicomachean Ethics* 1114 a: ‘We see then that bodily defects for which we are ourselves responsible are blamed, while those for which we are not responsible are not’; trans. H. Rackham.

⁵³ Gregory of Tours, *Life of Martin* 2.24. See Laes (2011c: 925–928) for an analysis of this account.

⁵⁴ Plutarch, *On Curiosity* 520c. On *moriones*, see Gevaert (2002). Garland (2010: 45–58) on the emperor and his exotic world.

⁵⁵ Augustine, *City of God* 16.8. Laes (2011c: 931–936) on conjoined twins.

burdened with the fear of bringing a deformed baby into the world. In *The Interpretation of Dreams* by Artemidorus of Daldis, we read that people are filled with disgust and fear when they dream about seeing someone with a deformity.⁵⁶

Entire libraries of books have been written on ancient interpretations of feelings of compassion.⁵⁷ To be sure, the ancient concept of compassion cannot simply be placed on the same level as our own, which inevitably bears a Christian tint and which suggests unconditional efforts on behalf of fellow humans who are the objects of compassion. In a society in which charity was usually inspired by utilitarian motives (the principle of *quid pro quo* and the proverbial *do ut des*), the exchange of services – giving and taking – was the most appropriate attitude. Ancient authors discuss the feeling of ‘compassion’ primarily in literary-theoretical treatments of tragedy or comedy, as well as in ethical and rhetorical tracts. For Aristotle, compassion (*eleos*) was a feeling of pain upon seeing undeserved suffering that individuals could expect might happen to themselves or their loved ones.⁵⁸ In this case as well, however, there appears to be a common theme with regard to people with disabilities. As cited above, the passage from Artemidorus invokes disgust and fear, in addition to feelings of compassion and sadness. We have encountered compassion in the context of purposely mutilated beggars in the ancient cities, as well as in Juvenal’s subtle analysis of why one gives alms to a blind beggar. The sentiment could also be recognised in Croesus’ solicitude regarding his non-speaking son and in the despair of the fathers who noticed that their sons could not learn to read.

A History of Long Duration, but with Little Change?

The [Introduction](#) to this book has already explained how it is possible to write a history of disabilities covering a period of 700 years or more. In the course of the account the reader has encountered only a few possible ‘turning points’ or ‘shifts’. The Hellenistic period brought about a change in the explicit depiction of disabilities. In the same period, Athens lost its system of benefit payments for invalid citizens. We do not know about developments in the hundreds of other *poleis*. Practices in Roman Egypt suggest the existence of tax exemptions, albeit not in any systematic

⁵⁶ Aristotle, *Nicomachean Ethics* 1099a-b; John Chrysostom, *On Virginity* 57.4; Artemidorus, *Oneirocritica* 3.47.

⁵⁷ Essential works for sociocultural historians include Bolkestein (1939); Hands (1969); Dover (1974).

⁵⁸ Aristotle, *Nicomachean Ethics* 1385b14–15. Outstanding discussions of the ancient concept of compassion can be found in Schrijvers (2011: 643–656).

manner. It is highly unlikely that the Stoic approach to physical disability influenced broader perceptions of disabilities. Emancipation for the masses was obviously not a concern for this philosophical school, which was exceptionally focused on the aristocracy. Nevertheless, under the influence of the Stoa, pain and suffering came to form a central topic of attention. Shadi Bartsch and other historians have tried to argue that the Roman Stoa introduced a new attitude towards the body and ushered in a culture in which people regarded and defined themselves as bodies susceptible to pain and suffering. Was this accompanied by a different attitude towards disabilities and people with disabilities, at least amongst a small part of the population?⁵⁹ The Romans appear to have had a stronger tendency than the Greeks to revere the heroic body of the war veteran. In this case as well, however, it had more to do with a change of discourse and representation than it did with any change in day-to-day reality. In the field of ancient medicine, as late as the fifth century AD, Caelius Aurelianus was still eager to refer back to the writings of the Hippocratic Corpus, the first texts of which dated from the fifth century BC. Although there was discussion, and although more subdivisions were gradually developed – particularly in the file of intellectual afflictions (Galen was much more extensive than Hippocrates in this regard), it is nevertheless impossible to posit any far-reaching medical revolution.

Each chapter has closed with a section on Christianity. I have aimed at a careful reading of the passages in context, since they often contain different theological, symbolical and allegorical layers. More often than not, the Gospel background is key to understanding what is meant. It is only by proceeding in such a way that these fragments might help to address the overall question of the impact of Christianity on notions of disability. Indeed, these sections have frequently suggested the possibility of change. Christian writers puzzled over the ‘why’ of suffering in general, as well as about the existence of disabilities in particular. The relationship between disease and sin became an important problem. In the steps of the suffering Christ, some ascetic streams came to glorify defects. The influence of the Stoa might have played a role in this regard as well. In the Christian communities, life was fundamentally regarded as suffering. Iconic martyrs went so far in tormenting and mutilating themselves that they became ‘disabled’ in some sense. It was precisely such self-mutilation that gave them their special status. Was this attitude, which appears shocking from a modern perspective, accompanied by a different attitude towards people

⁵⁹ Bartsch (2006); Bartsch and Wray (2009); Gevaert (2017).

with disabilities?⁶⁰ In the miracle stories of the saints, which invariably follow the miracles of Jesus, the amount of information provided about people with disabilities increases exponentially. Recent studies have explained ‘the birth of the hospital’ in part through the influence of Christianity. It could be that this development had an impact on the lives of at least some people with disabilities. Whether much changed in the collective mentality – whether people became more likely to allow deformed babies to live, whether they surrounded people with disabilities with more care or empathy – is a question that cannot be answered simply. Posing the question in itself assumes an upswing in history, an evolution from ‘inhuman paganism’ towards ‘enlightened Christianity’. This book is intended to provide a clear indication that the reality is much more complex.

New Paths

This first monograph on the subject is anything but the final word. Ancient history is increasingly developing in the direction of comparative approaches. Greeks and Romans have been examined within the context of world history. This approach contains many major challenges. In this book, Jewish and Christian texts have occasionally been compared with Greek and Roman sources. Comparisons with Chinese, Indian, Assyrian-Babylonian, Egyptian or Hittite traditions – to mention only those for which we have a rich supply of texts – would undoubtedly provide enrichment.⁶¹ The transition from late antiquity to the Early Middle Ages is a particularly important crossroads. For the Latin West, many texts on disabilities are waiting to be treated for the first time. The same is true for the Greek East. In these texts, we might discover how monotheistic empires developed different perspectives and/or practices, depending on their political and social situations. Other early Christian traditions (e.g. Armenian, Coptic or Syrian) undoubtedly conceal treasures as well. The other monotheistic traditions also deserve attention.⁶² Whereas the

⁶⁰ Perkins (1995: 208) describes early Christian communities as ‘communities focused on suffering and made up of sufferers’. Cf. p. 122 (the self-blinding of Kildare) or p. 181 (Petronilla, the daughter of Peter).

⁶¹ Most of these challenges have now been met in Laes (2017a). See particularly the contributions in the volume by Laes (2017b) as an introduction; Beal (2017); David (2017); Downer (2017); Kellenberger (2017); Milburn (2017) and Miles (2017) on earlier periods.

⁶² See the contributions by Solevåg (2017); Claes and Dupont (2017); Downer (2017); Efthymiadis (2017).

Jewish sources have been studied extensively,⁶³ the dialogue between ancient historians and historians of early Islam hardly exists at all. Recently, first monographs on disabilities in Islam have been published. The source material is immense and often completely unexploited. Yet scholars agree that those who were disabled comprised a category completely unlike how we conceive them in the present-day Western world. Theologically, they were ranked among the ‘people with afflictions’. Juridically, they were often regarded as ‘people with excuse’, surely in relation to matters of purity and ritual. More often than not, they were ranked as ‘strange and different people’: their ‘damaged’ or ‘blighted’ bodies were sometimes revealing of their moral inferiority. Disabilities, diseases, temporary ailments and extraordinary physical features all fell under this category of strange people.⁶⁴ Future collaboration between scholars of late antiquity and early Islam could reveal the uniqueness of the late antique period and the Early Middle Ages, in addition to allowing meaningful comparisons with the High Middle Ages, which have been better examined with regard to disabilities.⁶⁵

A Final Thought: The Emperor’s New Clothes

At the beginning of these closing thoughts, readers were encouraged to exchange their clothing in order to immerse themselves in a foreign world. In this book I have tried to customise various articles of clothing, but the tailoring has not been easy. To be sure, a structure ‘from head to toe’ is a possible approach, but the defects mentioned by the ancient writers have not always fitted into our categories. A certain degree of incongruence has remained. In these closing thoughts I have gone in search of ancient identity formation on the part of people who were ‘different’. Although it has been possible to identify certain limits, they have also not entirely corresponded to our disabilities.

Perhaps this study of Roman disabilities has taught us as much about ourselves as it has about the ancient world. Concrete assurances have ultimately been revealed to be less self-evident than initially thought. We have been unable to find the proper attire for our journey through time. This need not be a cause for shame. As long as we are aware that our

⁶³ Abrams (1998); Belser and Lehmhaus (2017).

⁶⁴ Ghaly (2009); Richardson (2012); Scalenghe (2014); Benkheira (2017) and Gaumer (2017) are recent publications on disabilities and (early) Islam.

⁶⁵ See the *Homo Debilis* project of the University of Bremen: www.mittelalter.uni-bremen.de/?page_id=29. Recent books include Metzler (2006); (2013) and (2016).

new clothes will never fit completely, we need not fear that – like the emperor in the fairy tale by Hans Christian Andersen – in our ignorance and haughtiness we are walking through the streets naked. Indeed, this book has exposed something about our own society. Primarily, however, it has opened an unexpected window onto antiquity. It has made people with disabilities – however difficult the concept may be – into more than a footnote in history.

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Index of Impaired Persons

This index contains all the persons who are mentioned throughout the book as experiencing some form of impairment. For Roman names, I acknowledge the problem of alphabetic ranking. In fact, a consequent ranking should only be based on the *nomen gentilicium*. Such would mean that the reader has to search for Cicero under the letter T (Marcus Tullius Cicero) or for Sulla under the letter C (Lucius Cornelius Sulla). The nomenclature of emperors is even more difficult. I have chosen to rank 'famous' Romans with the names by which they are best known in the history books. For those less known, I have used the *nomen gentilicium* as the criterium for alphabetic listing. I admit that there may be some arbitrariness in such choices. Since the lists per impairment are never exceedingly long, the readers will anyway easily find the person they are looking for. For Greek names, Latin spelling is used throughout.

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